# Commonwealth of Kentucky Michael G. Adams, Secretary of State

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Michael G. Adams
Secretary of State
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# **Certificate of Assumed Name**

**ASN** 

Pursuant to the provisions of KRS 365, the undersigned applies to assume a name and, for that purpose, submits the following statement:

1. The assumed name is:

#### **FAYETTE COUNTY PET SITTERS**

2. The name of the business entity that is adopting the assumed name:

## CRITTER SITTERS OF LEXINGTON, INC.

- 3. The business is organized and existing in the state or country of KY
- 4. The mailing address is:

## 332 HAMPTON CT, LEXINGTON KY 40508

This application will be effective on Tuesday, May 21, 2024.

I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

Samantha Moses Secretary 5/21/2024