

## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

1213088.04

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Michael G. Adams **Kentucky Secretary of State** Received and Filed: 12/18/2023 10:09 AM Fee Receipt: \$20.00

Division of Business Filings P.O. Box 718

Certificate of Withdrawal of Assumed Name

CWA

Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	(Domestic or Fo	preign Business Entity)		<b>347</b> 7
Pursuant to the provisions of KR submits the following statements	S 365, the undersign	ned applicant applies to with	draw an assumed name	and, for that purpose,
1. The assumed name to be with	IU(GWII IS	State Management & R		
		nust be identical to the name on		State.)
2. The assumed name has been discontinued by Granite Edvance Corporation				
This application will be effective		t be the exact name of the entity	or partners)	
4. The date the original certificate	·	2		
5. The "real name" is (you must ch		· · · · · · · · · · · · · · · · · · ·	<del></del> -	
a Domestic General Partnershipa Foreign General Partnership				
a Domestic Limited Liabi	lity Partnership	a Foreign Limited Liability Partnership		
a Domestic Limited Partnership		a Foreign Limited Partnership		
a Domestic Business Tru	ıst	a Foreign Business Trust		
a Domestic Corporation		X a Foreign Corporation		
a Domestic Limited Liability Company		a Foreign Limited Liability Company		
6. The mailing address is:				
4 Barrell Court	(	Concord	NH	03301
Street Address or Post Office Box Num	bers	City	State	Zip
I declare under penalty of perjury	under the laws of Ke			NT O
Signature of Authorized Party	~~(	Christiana Thornton Printed Name	President & C	Date
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