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Michael G. Adams **Kentucky Secretary of State** Received and Filed: 7/7/2023 2:26 PM Fee Receipt: \$20.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings Business Filings

Certificate of Assumed Name

ASN

| 4. The business is organized and | existing in the state or country of | Delaware | | |
|---|---|--|---|--|
| | Liability Company | - | iability Company | |
| a Domestic General Partnership a Domestic Limited Liability Partnership a Domestic Limited Partnership a Domestic Business Trust | | a Foreign Limited L a Foreign Limited F a Foreign Business | a Foreign General Partnership a Foreign Limited Liability Partnership a Foreign Limited Partnership a Foreign Business Trust | |
| 3. The "real name" is (you must che | e on record with the Secretary of S eck one): | , | | |
| following statement: 1. The assumed name is: Perform | s 365, the undersigned applies to a nance Team ty (and in the case of general part | | · | |
| Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov | | | | |