1375392.06 Michael G. Adams Secretary of State Received and Filed 7/11/2024 2:01:19 PM Fee receipt: \$20

ASN

C226

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

## Certificate of Assumed Name

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:

## NOW YOU SEE IT, NOW YOU DON'T

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

## LEOLYNN LLC

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

## 11716 Taylor Rae Dr, Louisville KY 40229

This application will be effective on Thursday, July 11, 2024.

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

Signature of individual signing on behalf of **Member: Corey L.** Besner

7/11/2024 2:01:19 PM