

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

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1389293.09  
Michael G. Adams  
Secretary of State  
Received and Filed  
9/11/2024 9:54:43 AM  
Fee receipt: \$20

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

**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:

**ALLIED UNIVERSAL ENHANCED PROTECTION SERVICES**

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

**MICHAEL STAPLETON ASSOCIATES, LTD.**

3. The entity is organized and existing in the state or country of **DE**

4. The mailing address is:

**450 Exchange Irvine, Irvine CA 92602**

This filing will be effective on **Wednesday, September 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 **VP, Consulting**

**Services: Hugh E. ORourke**

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