y of State Received and Filed 2/17/2025 10:03:11 AM Fee receipt: \$20

1430393.06

ASN

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:

STILES STALLION STATION

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

GEMINI FARMS LLC

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

7541 Morgantown Rd, Bowling Green KY 42101

This filing will be effective on Monday, February 17, 2025.

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 **Owner: Stephanie Stiles**

2/17/2025 10:03:11 AM