

COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

1352094.06

mmoore ASN

Michael G. Adams Kentucky Secretary of State Received and Filed: 4/26/2024 11:17 AM Fee Receipt: \$20.00

Division of Business Filings Business Filings P.O. Box 718, Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Assumed Name (Domestic or Foreign Business Entity) ASN		
Pursuant to the provisions of KRS following statement:	365, the undersigned applies to	assume a name and, for that p	ourpose, submits the
1. The assumed name is:	ASE LLC		
2. The name of the business entitioname: ELEVOTING Angly Name must be identical to the name		,	
3. The "real name" is (you must che			
a Domestic Genera a Domestic Limited a Domestic Limited a Domestic Busines a Domestic Corpora a Domestic Limited a Domestic Limited a Domestic Statutor a Domestic Limited	l Partnership Liability Partnership Partnership ss Trust ation Liability Company ry Trust Cooperative Association rporated Non-profit Association	i2 i h	ility Partnership nership ust ility Company ust
7 0 / 0.30 / 10 /	T-0 (0 N) 4 0 700		1 112162
Street Address or Post Office Box N	Trace Drive Apt 732 Numbers C	ity State	4 42103 <u>.</u> Zip
l declare under penalty of perjury t	under the laws of Kentucky that t	he forgoing is true and correct.	
Authorized Party Signature	Joy Pork	Member	04/25/2024 Date