

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

1125496.06

mmoore ASN

Michael G. Adams Kentucky Secretary of State Received and Filed: 1/12/2024 1:54 PM 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: 1. The assumed name is:	•	assume a name and, for tha	at purpose, submits the
The assumed hame is: 2. The name of the business enti		nership, the partners) that is	s/are adopting the assumed
name: PS LIGHTWAVE, LLC	J ()	, ,	
Name must be identical to the nam	e on record with the Secretary of S	tate.)	
a Domestic Limited a Domestic Busine a Domestic Corpora a Domestic Limited a Domestic Statuto a Domestic Limited	al Partnership I Liability Partnership I Partnership ss Trust ation I Liability Company by Trust I Cooperative Association rporated Non-profit Association	a Foreign Unincorpo	ability Partnership artnership Trust on ability Company
5959 CORPORATE DR., S	TE 3300 HOUSTON	√ TX	77036
Street Address or Post Office Box	Numbers Ci	ty State	e Zip
I declare under penalty of perjury	under the laws of Kentucky that th	ne forgoing is true and corre	ect.
Rook	RHONDA L. CO		01/12/2024
Authorized Rarty Signature	Printed Name	Title	Date