



COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings
P.O. Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov
Filing Fee: \$20

Amended Certificate of Assumed Name
(Domestic or Foreign Business Entity)

AAN

Pursuant to the provisions of KRS 365, the undersigned applies to amend the certificate of assumed name and, for that purpose, submits the following statement:

1. The assumed name is \_\_\_\_\_
(The name must be identical to the name on record with the Secretary of State.)

2. The certificate of assumed name was filed with the Secretary of State on: \_\_\_\_\_.

3. The current principal office address (if any) is:

Street Address or Post Office Box Number City State Zip

4. The principal office address is hereby changed to:

Street Address or Post Office Box Numbers City State Zip

5. The current real name is \_\_\_\_\_
(The name must be identical to the name on record with the Secretary of State.)

6. The real name is hereby changed to \_\_\_\_\_
(The real name must be distinguishable upon the records of the Secretary of State from any other name on record with the Secretary of State. KRS 14A.3-010 (1))

7. The changes in the identity of the partners are as follows: \_\_\_\_\_

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

Signature of Applicant Printed Name Title Date

## FILING INSTRUCTIONS AMENDED CERTIFICATE OF ASSUMED NAME

### NAME

The certificate must state the assumed name under which business will be conducted or transacted. The assumed name must be a name that is distinguishable upon the records of the Secretary of State from any other name previously filed and on record with the Secretary of State. A separate certificate must be filed for each assumed name that is being adopted by the business.

KRS 365.015(3) requires the certificate of assumed name for an *individual (sole proprietorship)* to be filed with the county clerk where the person is deemed a resident for the purposes of and under the provisions of KRS Chapter 355. An assumed name registration is effective for a term of five (5) years from the date it is filed with the Secretary of State and may be renewed for a successive term upon filing a renewal certificate. A renewal certificate must be filed with the Secretary of State within six (6) months prior to the expiration date. A renewal certificate filed with the Secretary of State renews the assumed name for a five-year term. The business entity should arrange its own reminder of the renewal deadline, since the Secretary of State is not required to send renewal certificates. **Any certificate of assumed name in effect on July 15, 1998, shall continue in effect for five (5) years and may be renewed by filing a renewal certificate with the Secretary of State.**

### PRINCIPAL OFFICE ADDRESS

The principal office is the office (in or out of this state) so designated in writing with the Office of the Secretary of State where the principal designated office of the business entity is located. This address is where all correspondence from the Office of the Secretary of State (See Document Delivery) will be submitted.

### REAL NAME

The real name is defined as follows:

- The real name of a Domestic General Partnership is the name that includes the real name of each general partner;
- The real name of a Domestic Registered Limited Liability Partnership is the name stated in its statement of registered limited liability partnership filed pursuant to KRS Chapter 362;
- The real name of a Domestic Limited Partnership is the name stated in its Certificate of Limited Partnership filed pursuant to KRS 362;
- The real name of a Domestic Business Trust is the name set forth in its Declaration of Trust;
- The real name of a Domestic Corporation is the name set forth in its Articles of Incorporation;
- The real name of a Domestic Limited Liability Company is the name set forth in its Articles of Organization;
- The real name of a Foreign General or Limited Partnership and of a Foreign Business Trust is the name recognized by the laws of the foreign state under which it is formed as being the real name or the fictitious name adopted for use in this state;
- The real name of a Foreign Limited Liability Partnership is the name stated in its statement of foreign qualification filed pursuant to KRS 362.1
- The real name of a Foreign Corporation is the name set forth in its Articles of Incorporation or the fictitious name adopted for use in this state under KRS 271B.15-060; or
- The real name of a Foreign Limited Liability Company is the name set forth in its articles of organization or the fictitious name adopted for use in this state under KRS 275.410;
- The real name must comply with the ending requirements of KRS 14A.3-010.

### EFFECTIVE DATE AND TIME

The document will be effective on the date and time of filing.

### WHO MAY SIGN

The document must be signed by:

- at least one partner authorized to do so by the partners of a Domestic or Foreign General Partnership;
- at least one partner authorized to do so by the partners of a Domestic or Foreign Registered Limited Liability Partnership;
- a general partner of a Domestic or Foreign Limited Partnership;
- the trustees of a Domestic or Foreign Business Trust;
- any person authorized to act for the Domestic or Foreign Corporation; or
- a member or manager authorized to act for the Domestic or Foreign Limited Liability Company.

### DOCUMENT DELIVERY

A file stamped postcard will be sent to the principal office address. If the applicant wishes for the document to be sent to an alternate address other than the principal office, a request must be submitted in writing affirming that request. Alternate address requests must be submitted with each document filed with the Office of the Secretary of State.

### NUMBER OF COPIES

If filing via mail or in person, one exact or conformed copy of the documents with the filing fee must be submitted to the address below. To make a copy of the filing for delivery to the local county clerk's office, visit [www.sos.ky.gov](http://www.sos.ky.gov) and print a copy from the organization search tool.

### FILING FEE

The filing fee for this document is \$20.00. Checks should be made payable to the "Kentucky State Treasurer."

### MAILING ADDRESS

Michael Adams  
Office of the Secretary of State  
P.O. Box 718  
Frankfort, KY 40602-0718

### OFFICE LOCATION

Room 152, Capitol Building  
700 Capital Avenue  
Frankfort, KY 40601  
Hours of Operation: 8:00 AM-4:30 PM ET

### CONTACT INFORMATION

(02/23)

If you have any questions, please feel free to visit our website at [www.sos.ky.gov](http://www.sos.ky.gov) or call 502-564-3490.