

Certificate To Do Business Under Assumed Name By Individual
—KRS 365.015—

This form is to be used only by an individual doing business under an assumed name.

FILE WITH COUNTY CLERK, OR, IF A PARTNERSHIP OR CORPORATION, USE FORM ON PAGE 7A AND FILE WITH SECRETARY OF STATE AND COUNTY CLERK,

TO WHOM IT MAY CONCERN:

This certifies that the business to be known as _____
Name

_____ located in _____ County,
Address

Commonwealth of Kentucky, is owned and operated by _____
Name

_____ Address

Signature

Title

COMMONWEALTH OF KENTUCKY)
COUNTY OF _____)

I, _____, Notary Public in and for the State and
County indicated above, do certify that the foregoing instrument of writing was this date presented to
me by _____, who delivered, signed, and acknowledged
same to be (his-her) act and deed.

Witness my hand and seal this _____ day of _____, 20 _____

My commission expires: _____

County Clerk

NOTARY PUBLIC

Date of Filing