



Form Revision Date 07/2016

CERTIFICATE OF ASSUMED NAME

For use by DOMESTIC LIMITED LIABILITY COMPANY

Pursuant to the provisions of Act 23, Public Acts of 1993, the undersigned execute the following Certificate:

1. The identification number assigned by the Bureau is:	<input type="text" value="802638491"/>
2. The name of the limited liability company is:	<input type="text" value="KICKZNKARDZ, LLC"/>

3. The assumed name under which business is to be transacted is:

GEMTCG

This document must be signed by an authorized officer or agent (corporations); a member, manager, or an authorized agent (limited liability companies); or general partner (limited partnerships):

Signed this 22nd Day of July, 2024 by:

Signature	Title	Title if "Other" was selected
Andrew Sassine	Member	

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

☐ Decline ☒ Accept

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
FILING ENDORSEMENT

This is to Certify that the CERTIFICATE OF ASSUMED NAME

for

KICKZNKARDZ, LLC

ID Number: 802638491

to transact business under the assumed name of
GEMTCG

received by electronic transmission on July 22, 2024 ***, is hereby endorsed.***

Filed on July 24, 2024 ***, by the Administrator.***

The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.

Expiration Date: December 31, 2029



In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 24th day of July, 2024.

Linda Clegg

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau