COMMONWEALTH OF KENTUCKY

Department of State



Office of Secretary of State

FRANCES JONES MILLS, SECRETARY

Corporation Process Agent Certificate

Statement of corpor	aiion requirea b	'y Kentucky Statut	es,
designating District	Elder William P. Fore	3e	- California de la Calabaga
834 South Third Street, Lo			ent,
upon whom process may	be served for the	_	
The Apostolic Home for the	e Aged		a
domestic Corporation (a	Corporation of	Kentucky	.),
has been received and			
is now authorized to		~	
STATE OF THE STATE	to the restrictions i	imposed by law.	
		ature this 21st. day	y of
	June J		
AT Opening		Secretary of Sta	ite
	RN merchanic	Against Computer of Ca	Mercuriacioni.

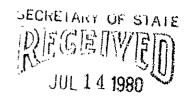
SECRETARY OF STATE

COMMONWEALTH OF KENTUCKY



FRANCES JONES MILLS

SECRETARY OF STATE FRANKFORT, KENTUCKY



STATEMENT OF CORPORATION Commonwealth of Kentucky

FOR DESIGNATING PROCESS AGENTS

Address of Home Office . 834	South Third Street, Louisville, Kentucky, 40203
Mailing Address 834 Sout	h Third Street, Louisville, Kentucky 19203 (EIVE
	181734 980
SIR: Notice is hereby given that,	\$ 5.00e
The Apos	tolic Home for the Aged Composition (Name of Corporation)
is a corporation of the State of	Kentucky
•	address in 834 South Third Street, Louisville Kentuc No P.O BOX NUMBERS (Must be the same as authorized agents address) zip code, 40203
	December 15, 1942
Name of authorized agent or agents, str Kentucky Business or Registered Office)	rect, bldg, or route no. address as follows: (Must be the same as
District Elder William P. Fore	e, 834 South Third Street, Louisville, Ky.
	, ку.
	, Ку.
is our agent thereat, upon whom pro-	cess can be served in any suit that may be brought against our
Company, within the State of Kentucky.	
Has this corporation had a former agent?	Yes or No Yes
Done at	
ORIGINAL COPY FILED SECHETARY OF STATE OF KENTUCKY FRANKEURS ALMINERS	Signature Eld. William & France President
	Print Name VITLLIAM P. FOREE
AUG Z 1 1980	Signature, Secretary
Grand Wille M.M.	Print Name
All Corporations shall at all three have or agent or agents there, upon whom proces	ne or more known places of business in this state, and an authorized

(FILING AND RECORDUAL FEE \$5.00)

NOTE THE ADDRESS OF KENTUCKY BUSINESS OR REGISTERED OFFICE ADDRESS AND THE ADDRESS OF THE AUTHORIZED OR PROCESS AGENT MUST BE IDENTICAL, NO Σ 0. BOX NUMBERS.