Commonwealth of Kentucky Michael G. Adams, Secretary of State

0578200.12 Michael G. Adams Secretary of State Received and Filed

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Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Withdrawal of Assumed Name

CWA

W266

Pursuant to the provisions of KRS 365, the undersigned applicant applies to withdraw an assumed name and, for that purpose, submits the following statements:

1. The assumed name is:

TRADEWATER HEALTH AND REHABILITATION CENTER

2. The assumed name has been discontinued by

TRADEWATER POINTE, LLC

- 3. This application will be effective on Thursday, July 11, 2024.
- 4. The date the original certificate was filed:

Thursday, July 11, 2024

5. The mailing address of the entity's principal office is

2850 NORTH MAIN STREET, Frankfort, KY 40602-1515

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

Signature of individual signing on behalf of **Attorney: Marian J. Hayden**

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