



COMMONWEALTH OF KENTUCKY
MICHAEL ADAMS, SECRETARY OF STATE

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Michael G. Adams
Kentucky Secretary of State
 Received and Filed:
 9/30/2020 2:12 PM
 Fee Receipt: \$50.00

Division of Business Filings Business Filings P.O. Box 718, Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Incorporation Professional Service Corporation	KPS
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Pursuant to KRS 14A, KRS 271B and KRS 274, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the corporation is Southcentral Kentucky Regional Cancer Center, PSC

Article II: The number of shares the corporation is authorized to issue is 1000

Article III: The name and street address of the corporation's initial registered agent and office in Kentucky is

Richard A. McGahan	1728 Rockingham Avenue	Bowling Green	KY	42101
Name	Street Address (No Post Office Box Numbers)	City	State	Zip Code

Article IV: The mailing address of the corporation's principal office is

1728 Rockingham Avenue	Bowling Green	KY	42101
Street Address or Post Office Box Number	City	State	Zip Code

Article V: The profession to be practiced through the professional service corporation is medicine.

Article VI: The names and street addresses of the original shareholders of the professional service corporation are:

Richard A. McGahan	1728 Rockingham Avenue	Bowling Green	KY	42101
Name	Street Address	City	State	Zip Code

Name	Street Address	City	State	Zip Code
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Name	Street Address	City	State	Zip Code
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Article VII: The name and street address of the incorporator is as follows:

Richard A. McGahan	1728 Rockingham Avenue	Bowling Green	KY	42101
Name	Street Address or Post Office Box Number	City	State	Zip Code

Name	Street Address or Post Office Box Number	City	State	Zip Code
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Article VIII: Each of the incorporators, shareholders, not less than one half (1/2) of the directors and each of the officers other than secretary or treasurer is a qualified person within the meaning of this chapter.

Article IX: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The effective date is the date the application is filed.

Please indicate the county in which your business operates:

County: Warren

To complete the following, please shade the box completely.

Please indicate the size of your business:

☒ Small (Fewer than 50 employees)
☐ Large (50 or more employees)

Please indicate whether any of the following applies to your business ownership:

☐ Women Owned ☐ Veteran Owned ☐ Minority Owned

Please indicate which of the following best describes your business:

☐ Agriculture ☐ Mining ☐ Services ☐ Construction
☐ Wholesale Trade ☐ Retail Trade ☐ Manufacturing ☐ Finance, Insurance, Real Estate
☐ Public Administration ☐ Transportation, Communications, Electric, Gas, Sanitary Services
☒ Other

Declarant by:

I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Signature of Incorporator 	Printed Name Richard A. McGahan	Title Incorporator	Date 9/30/2020
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I, Richard A. McGahan, consent to serve as the registered agent on behalf of the corporation.

Signature of Registered Agent 	Printed Name Richard A. McGahan	Title Registered Agent	Date 9/30/2020
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