Commonwealth of Kentucky Michael G. Adams, Secretary of State

0469605.04 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:

FRANKFORT PD DIALYSIS

2. The assumed name has been discontinued by

TOTAL RENAL CARE, INC.

- 3. This filing will be effective on Friday, October 25, 2024.
- 4. The date the original certificate was filed:

Thursday, June 4, 2020

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

601 HAWAII STREET ATTN: JLD/SECGOVFIN, EL SEGUNDO, CA 90245

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 **Secretary: Stephanie N. Berberich** 10/25/2024 5:23:53 PM