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Michael G. Adams Kentucky Secretary of State Received and Filed: 12/18/2023 8:43 AM Fee Receipt: \$40.00



## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

| P.O. Box 718 P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov   | Certificate o<br>(Foreign Bus                     | f Withdrawal<br>iness Entity)                             |  | WFE                   |
|---|---|---|--|-----------------------|
| Pursuant to the provisions of KR business entity named below and  | S 14A - 030 the under<br>d, for that purpose, sub | signed applies for a certific                             | cate of withdrawal on ents:                    | behalf of the         |
| The name of the business entity is  |   |   | WellCar LLC                                    |                       |
|   | (The name must b                                  | e identical to the name on                                | record with the Secret                         | ary of State.)        |
| 2. The state or country of formation is   |   | Texa  | Texas  |                       |
| The Secretary of State may for on the Secretary of State and  | orward to the business<br>d commits to notify the | entity at the following stre<br>Secretary of State of any | et address any proce<br>future changes to this | ss served<br>address: |
| 1597 Cole Blvd., Suite 200  |   | Lakewood  | co   | 80401                 |
| Street Address (No Post Office Box Numbers)   |   | City  | State  | Zip Code              |
| <ol> <li>The business entity is not transacting business in the Commonwealth and surrenders its authority to transact business in the Commonwealth or pursuant to KRS 14A.9-010(7) the business entity is a foreign insurer with a certificate of authority from the commissioner of the Department of Insurance.</li> <li>The business entity revokes the authority of its registered agent to accept service of process on its behalf and appoints the Secretary of State as its agent for service of process in any proceeding based on a cause of action arising during the time it was authorized to transact business in the Commonwealth. The business entity shall notify the Secretary of State in the future of any change in its mailing address.</li> </ol> |   |   |  |                       |
| 6. This application will be effecti   | ve upon filing.                                   |   |  |                       |
| I declare under penalty of peliury  | / under the laws of Ker                           |   | true and correct.<br>ore Terry                 | 12/07/2023            |
| Signature of Authorized Represer  | ıtative   | Printed Name  |  | Date                  |