

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

**0046023.04**  
**Michael G. Adams**  
**KY Secretary of State**  
 Received and Filed  
**5/10/2021 10:37:04 AM**  
 Fee receipt: **\$20.00**

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

**Renewal Certificate of  
 Assumed Name**

**REN**

This certifies that the assumed name of

**ST. CLAIRE REGIONAL MEDICAL LIBRARY**

is hereby renewed by

**ST. CLAIRE MEDICAL CENTER, INC.**

a business entity organized and existing in the state of Kentucky.

**Signatures**

**Signature**

**Title**

**Date**

Donald H. Lloyd, II

President/CEO

5/10/2021 10:37:04 AM