



COMMONWEALTH OF KENTUCKY
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

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Michael G. Adams
Kentucky Secretary of State
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Division of Business Filings
Business Filings
PO Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov
Certificate of Assumed Name
(Domestic or Foreign Business Entity)
ASN

Pursuant to the provisions of KRS 365, the undersigned applies to assume a name and, for that purpose, submits the following statement:

- 1. The assumed name is: Caretenders - Cadiz
2. The name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed name: Trigg County Home Health, Inc.
Name must be identical to the name on record with the Secretary of State.)

- 3. The "real name" is (you must check one):
a Domestic General Partnership
a Foreign General Partnership
a Domestic Limited Liability Partnership
a Foreign Limited Liability Partnership
a Domestic Limited Partnership
a Foreign Limited Partnership
a Domestic Business Trust
a Foreign Business Trust
a Domestic Corporation
a Foreign Corporation
a Domestic Limited Liability Company (checked)
a Foreign Limited Liability Company

4. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective cannot be prior to the date the application is filed. The date and/or time is (Delayed effective date and/or time)

5. The business is organized and existing in the state or country of Kentucky

6. The mailing address is:
901 Hugh Wallis Road South Lafayette LA 70508
Street Address or Post Office Box Numbers City State Zip

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

Joshua L. Proffitt Joshua L. Proffitt President 12/04/2023
Authorized Party Signature Printed Name Title Date