

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed

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Fee receipt: \$1,246.00

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

Certificate of Authority

RCA

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

1. The business entity is a limited liability company.
2. The name of the entity is: SOLTERRA CARE CENTERS MANAGEMENT, LLC
3. The name of the entity to be used in Kentucky is (if applicable):
4. It is an entity organized and existing under the laws of the state of Delaware.
5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

Principal Office

300 Provider Court
Suite 100
Richmond, KY 40475

Registered Agent Name/Address

Registered Agents Inc
212 N. 2nd St. STE 100
Richmond, KY 40475

Members/Managers

Member Eli Grinspan 300 Provider Court, Richmond KY 40475

6. Angela Stidam, VP Finance, on 5/4/2024

7. I, Registered Agents Inc, consent to serve as the registered agent on behalf of the this entity on 5/4/2024