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Michael G. Adams Kentucky Secretary of State Received and Filed: 3/4/2024 2:23 PM Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		of Withdrawal siness Entity)		WFE
Pursuant to the provisions of KR business entity named below and				awal on behalf of the
The name of the business en	ity is TRUBRIDGE (I	DELAWARE), LLC		
	(The name must	be identical to the nar	ne on record with the	e Secretary of State.)
2. The state or country of format	ion is Delaware			·
The Secretary of State may for on the Secretary of State and	orward to the busines	s entity at the followir e Secretary of State o	ng street address an of any future change	y process served es to this address:
54 St. Emanuel Street		Mobile	AL	36602
Street Address (No Post Office Bo	x Numbers)	City	State	Zip Code
 The business entity is not trar in the Commonwealth or pursuar authority from the commissioner The business entity revokes appoints the Secretary of State a during the time it was authorized of State in the future of any chan This application will be effective 	nt to KRS 14A.9-010(of the Department of the authority of its reg is its agent for service to transact business ge in its mailing addr	 the business entity Insurance. gistered agent to access of process in any print the Commonwealt 	is a foreign insurer ept service of proces oceeding based on	with a certificate of ss on its behalf and a cause of action arising
declare under penalty of perjury	under the laws of Ke	entucky that the forgo	ing is true and corre	ect.
kevin Plessner		Kevin Plessner		2/28/2024
Signature of Authorized Represen	tative	Printed Name		Date