

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: \$810.00

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: PHYSICIAN MANAGEMENT SERVICES OF EASTERN KENTUCKY, 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 Florida.
5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

Principal Office

3113 LAWTON RD
STE 250
ORLANDO, FL 32803

Registered Agent Name/Address

Corporation Service Company
421 West Main Street
Frankfort, KY 40601

Members/Managers

Manager	Casey DeLoach	3113 Lawton Road Ste 250, Orlando, FL 32803
Manager	Brett Kenefick	3113 Lawton Road Ste 250, Orlando, FL 32803

6. James McGinn, CFO, on 9/29/2023

7. I, Corporation Service Company, consent to serve as the registered agent on behalf of the this entity on 9/29/2023