Commonwealth of Kentucky Michael G. Adams, Secretary of State

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

Certificate of Renewal of Assumed Name

RAN

C227

Pursuant to the provisions of KRS 365, the undersigned applies to renew an assumed name and, for that purpose, submits the following statements:

1. The assumed name is:

LOUISVILLE DIALYSIS

2. The assumed name is being renewed by:

NEW SPRINGS DIALYSIS, LLC

- 3. The entity is organized and existing in the state or country of **DE**.
- 4. The mailing address of the entity's principal office is

601 HAWAII STREET, EL SEQUNDO, CA 90245

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

Signature of individual signing on behalf of **Authorized Party: Stephanie N. Berberich** 6/13/2024