

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
Secretary of State
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Secretary of State
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Articles of Organization
Limited Liability Company

KLC

Pursuant to KRS 14A and KRS 275, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the limited liability company is

RESTORATIVE FAMILY MEDICINE LLC

Article II: The name of the initial registered agent is

Cari Beth Wildharber

and the street address of the entity's initial registered office in Kentucky is

4088 Tabor Road, Barlow, KY 42024

Article III: The mailing address of the entity's principal office is

4088 Tabor Road, Barlow, KY 42024

Article IV: This entity is managed by **Managers**.

This filing will be effective on **Friday, January 3, 2025**.

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

Signature of individual signing on behalf of **Organizer: Cari Beth Wildharber**

I, **Cari Beth Wildharber**, consent to serve as the Registered Agent on behalf of this entity on Friday, January 3, 2025.