# Commonwealth of Kentucky Michael G. Adams, Secretary of State

0020938.04 Michael G. Adams Secretary of State Received and Filed 7/11/2024 8:24:54 AM

Fee receipt: \$20

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# 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:

#### **GREENVIEW REGIONAL HOSPITAL**

2. The assumed name is being renewed by:

### GREENVIEW HOSPITAL, INC.

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

## ONE PARK PLAZA LEGAL DEPARTMENT, NASHVILLE, TN 37202-0750

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: Natalie H. Cline, Vice President & Secretary**7/11/2024