COMMONWEALTH OF KENTUCKY TREY GRAYSON SECRETARY OF STATE



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Michael G. Adams Kentucky Secretary of State Received and Filed: 6/26/2023 12:49 PM Fee Receipt: \$50.00

ARTICLES OF INCORPORATION

Professional Service Corporation

For the purposes of forming a professional service corporation in Kentucky pursuant to KRS Chapter 274, the undersigned incorporator(s) hereby submit(s) the following Articles of Incorporation to the Secretary of State for filing:

Article I: The name of the corporation is U.S. Anesthesia Partners of Kentucky, PSC Article II: The number of shares the corporation is authorized to issue is 100 Article III: The street address of the corporation's initial registered office in Kentucky is 40601 Frankfort, KY 421 West Main Street Zip Code City State Street and the name of the initial registered agent at that office is _____ Corporation Service Company Article IV: The mailing address of the corporation's principal office is ΤX 75251 Dallas 1222 Merit Drive, Suite 700 State Zip Code City Street or PO Box N Article V: The profession to be practiced through the professional service corporation is medicine Article VI: The names and residence addresses of the original shareholders of the professional service corporation are: 20759 Fulton MD Richard P. Dutton, M.D. 9431 Lovat Rd. Street or PO Box Number State Zip Code Citv Name Street or PO Box Number City State Zip Code Name Article VII: The name and mailing address of each incorporator is Fulton MD 20759 9431 Lovat Rd. Richard P. Dutton, M.D. Street or PO Box Number City State Zip Code Name City State Zip Code Street or PO Box Number Name Street or PO Box Number Citv State Zip Code Name

Article VIII: Each of the incorporators, shareholders, not less than one half (1/2) of the directors and each of the officers other than secretary or treasurer is a qualified person within the meaning of Chapter 274.

Executed by the Incorporator(s) on _____Jun 22, 2023

Richard P. Dutton, MD

Signature of Incorporator

Richard P. Dutton, M.D.

Signature of Incorporator

Corporation Service Company Type or print name of registered agent

_____, consent to serve as the registered agent on behalf of the corporation.

Melissa Lemus Signature of Registered Agent Melissa Lemus, Assistant Secretary

Type or Print Name & Title

(See attached sheet for instructions)