

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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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>

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

**DPT MFT Trauma Therapy LLC**

Article II: The name of the initial registered agent is

**Northwest Registered Agent LLC**

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

**212 N. 2nd St. STE 100, Richmond, KY 40475**

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

**2620 Bardstown Road Suite 4, Louisville, KY 40205**

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

This filing will be effective on **Tuesday, August 13, 2024**.

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: Diane P Taylor**

I, **Diane P Taylor**, consent to sign for **Northwest Registered Agent LLC** who serves as the Registered Agent on behalf of this entity on Tuesday, August 13, 2024.