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ASN
Michael G. Adams
Kentucky Secretary of State
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COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings
Business Filings
P.O. Box 718,
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

Certificate of Assumed Name
(Domestic or Foreign Business Entity)

ASN

Pursuant to the provisions of KRS 365, the undersigned applies to assume a name and, for that purpose, submits the following statement:

1. The assumed name is: Jackson Purchase Primary Care - Southside Clinic

2. The name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed name:

Pinelake Physician Practice, LLC

Name must be identical to the name on record with the Secretary of State.)

- 3. The "real name" is (you must check one):

<ul style="list-style-type: none"> a Domestic General Partnership a Domestic Limited Liability Partnership a Domestic Limited Partnership a Domestic Business Trust a Domestic Corporation a Domestic Limited Liability Company a Domestic Statutory Trust a Domestic Limited Cooperative Association a Domestic Unincorporated Non-profit Association 	<ul style="list-style-type: none"> a Foreign General Partnership a Foreign Limited Liability Partnership a Foreign Limited Partnership a Foreign Business Trust a Foreign Corporation <input checked="" type="checkbox"/> a Foreign Limited Liability Company a Foreign Statutory Trust a Foreign Limited Cooperative Association a Foreign Unincorporated Non-profit Association
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4. The business is organized and existing in the state or country of Delaware

5. The mailing address is:

330 Seven Springs Way Brentwood Tennessee 37027

Street Address or Post Office Box Numbers City State Zip

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

<small>DocuSigned by:</small> <i>Charlotte Lawrence</i> <small>B92A4AD58CE5427</small>	Charlotte Lawrence	Secretary	9/25/2023
<hr/> Authorized Party Signature	<hr/> Printed Name	<hr/> Title	<hr/> Date