

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

P101

1259644  
Michael G. Adams  
KY Secretary of State  
Received and Filed

2/10/2023 3:19:52 PM

Fee receipt: \$90.00

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

1. The business entity is a **profit corporation**.
2. The name of the entity is: **SENTRYHEALTH, INC.**
3. The name of the entity to be used in Kentucky is (if applicable):
4. The state or country whose law the entity is organized is **Delaware**.
5. The date of organization is **3/1/2022** and the period of duration is **perpetual**.

**7. Principal Office**

7410 New LaGrange Road, Suite 205  
Louisville, KY 40222

**8. Registered Agent/Office**

Brinkman & Associates  
6001 Two Springs Lane  
Louisville, KY 40222

I, **Scott Brinkman**, consent to sign for **Brinkman & Associates** who serves as the **Registered Agent** on behalf of this Entity.  
on Friday, February 10, 2023

As the Authorized Representative, I, **James Kevin Porter**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **President & CEO**