

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

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Michael G. Adams  
KY Secretary of State

Received and Filed

11/22/2024 12:00:00 AM

Fee receipt: \$172.00

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**

**RCA**

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 nonprofit corporation.
2. The name of the entity is: NATIONAL ASSOCIATION OF PREFERRED PROVIDERS, INC.
3. It is an entity organized and existing under the laws of the state of Texas.
4. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

**Principal Office**

11111 RICHMOND AVE  
SUITE 250  
HOUSTON, TX 77082

**Registered Agent Name/Address**

CT Corporation System  
306 W. Main St., Ste. 512  
Frankfort, KY 40601

**Current Officers**

President	Rami Hassan	11111 Richmond Ave Suite 250 Houston Texas 77082
Secretary	Tammy Brown	11111 Richmond Ave Suite 250 Houston Texas 77082

6. Rami Hassan, President, on 11/22/2024

7. I, CT Corporation System, consent to serve as the registered agent on behalf of the this entity on 11/22/2024