



COMMONWEALTH OF KENTUCKY
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

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

Registration or Renewal of Entity Name
(Foreign Business Entity)

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Pursuant to the provisions of KRS 14A and KRS Chapter 271B, 273, 274, 275, 362 or 386, the undersigned applies for registration or renewal and, for that purpose, submits the following statements:

1. The entity is a : ☐ profit corporation (KRS 271B). ☐ nonprofit corporation (KRS 273).
☐ professional service corporation (KRS 274). ☐ business trust (KRS 386).
☒ limited liability company (KRS 275). ☐ limited partnership (KRS 362).
☐ professional limited liability company (KRS 275).

2. The activity request is:

☒ Registration

☐ Renewal

3. The name of the entity is American Health and Wellness Institute, LLC

4. The state or country of organization is Virginia

5. The date of organization is 9/21/2009

6. The mailing address of the entity is

25 Professional Way	Verona	VA	24482
Street Address or Post Office Box Numbers	City	State	Zip Code

7. The nature of the business of the entity is provision of mental health services

(Please print brief description)

8. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is _____.

(Delayed effective date
and/or time)

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

[Signature]
Signature of Authorized Agent

Victor Moldovan
Printed Name

Attorney
Title

4.9.12
Date