

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

38584894

0069659
Michael G. Adams
KY Secretary of State
Received and Filed

3/28/2023 12:07:46 PM

Fee receipt: \$20.00

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

**Certificate of Renewal of
Assumed Name**

RAN

Pursuant to the provisions of KRS 365.015(4), the undersigned hereby applies to renew an assumed name, and for that purpose, submits the following statements:

1. This certifies that the assumed name of the business entity is:

HOSPICE & PALLIATIVE CARE OF LOUISVILLE

2. The assumed name is being renewed by:

HOSPARUS, INC.

4. The business entity is organized and existing in the state or country of

KY.

4. The mailing address of the business entity is:

6200 DUTCHMANS LANE, LOUISVILLE KY 402053271

5. I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Lynn K. Fieldhouse

3/28/2023