

Kentucky Secretary of State Annual Report

This Annual Report was submitted electronically

| | |
|-------------------|------------------------------|
| Company | PROMISE HEALTH SERVICES, LLC |
| Company ID | 0661963.06.99999 |
| Date Filed | 10/29/2008 2:13:11 PM |
| Fee | \$15.00 |

Principal Office

240 16TH STREET
ASHLAND, KY 41105

Registered Agent

DERRICK HAMMOND
240 16TH STREET
ASHLAND, KY 41105

Members / Managers

| | | |
|---------|-----------------|-----------------------------------|
| Manager | Derrick Hammond | 207 - 16th St., Ashland, Ky 41101 |
|---------|-----------------|-----------------------------------|

Signatures

| | |
|------------------|-----------------|
| Signature | Derrick Hammond |
| Title | Manager |