Commonwealth of Kentucky Michael G. Adams, Secretary of State

L902 1368166.06 Michael G. Adams Secretary of State Received and Filed 5/29/2024 12:00:00 AM

Fee receipt: \$90

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 entity is a **limited liability company**.
- 2. The name of the entity is

Integrated Health Systems LLC

3. The name of the entity to be used in Kentucky is

INTEGRATED SYSTEMS LLC

- 4. The state or country under whose law the entity is organized is Kansas.
- 5. The date of organization is 11/21/2016 and the period of duration is perpetual.
- 6. The mailing address of the entity's principal office is

4551 W 107th St Suite 220, Overland Park, KS 66207

7. The name of the initial registered agent is

Corporation Service Company

and the street address of the entity's initial registered office in Kentucky is

421 W Main Street, Frankfort, KY 40601

8. The names and business addresses of the entity's representatives:

Manager	Kevin Green	4551 W 107th St Suite 220, Overland Park, KS 66207
Organizer	Kevin Green	4551 W 107th St Suite 220, Overland Park, KS 66207
Manager	Amy Srp	4551 W 107th Street, Suite 220, Overland Park, KS 66207
Organizer	Amy Srp	4551 W 107th Street, Suite 220, Overland Park, KS 66207

- 9. This entity is managed by Managers.
- 10. This application will be effective on Wednesday, May 29, 2024.

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Kentucky that the foregoing is true and corre Signature of individual signing on behalf of **VI Amy Srp, VP of HR & Admin.**

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I, **Tyler Yates**, consent to sign for **Corporat**. Company who serves as the Registered Agent on behalf of this entity on Wednesday, May 29, 2024.

