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tsemones AGD

Michael G. Adams Kentucky Secretary of State Received and Filed: 12/13/2022 2:50 PM Fee Receipt: \$0.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

	ASST. SECRETARY Rocket Lawyer Corpora		
Signature of Registered Agent	Printed Name	Date	
I declare under penalty of p	erjury under the laws of Kentucky that the forgoing is true and EDNA PERRY		2.13.2022
		d correct	
The agency appointmen the date on which the state	t shall be terminated and the registered office discontinued, if ment is filed.	f so provided,	on the 31 st day after
	·		
Street Address or Post Office B		State	Zip
•	ROAD SUITE 219 LEXINGTON	KY	40504
5. The mailing address of t			
4. The business entity was	organized and existing in the state or country of KY		•
□ a l	business trust (KRS 386)		
□ a	imited liability partnership (KRS 362); or		
□ a l	imited partnership (KRS 362);		
✓ a	imited liability company (KRS 275);		
3. The business is:	corporation (KRS 271B, KRS 273 or KRS 274);		
2. The business entity which	th I am resigning from is Gerhardt's Home Remed (The name must be identical to the name o		
_	Carbardt'a Hama Damad	diaa LLC/	1170770
discontinue the reg			
resign as registered	agent: and/or		
resignation of registered ag	of KRS Chapter 14A and 271B, 273, 274, 275, 362 or ent and, for that purpose, submits the following statements: Corporate Services LLC	386, the und	dersigned applies fo , do hereby
(502) 564-3490 www.sos.ky.gov			
Division of Business Filin Business Filings PO Box 718 Frankfort, KY 40602	Statement of Resignation of Registere (Domestic or Foreign Business Entity)	d Agent	SRA