

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

1180671 1180671

Michael G. Adams  
KY Secretary of State  
Received and Filed

10/27/2023 12:00:00 AM

Fee receipt: \$136.00

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

**Certificate of Authority**

**RCA**

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 business entity is a limited liability company.
2. The name of the entity is: Cuattro Medical LLC
3. The name of the entity to be used in Kentucky is (if applicable): Cuattro Medical LLC
4. It is an entity organized and existing under the laws of the state of Delaware.
5. The date of organization is 10/29/2008 and the period of duration is perpetual

**Principal Office**

920 Miller Ave  
Shelbyville, KY 40065

**Registered Agent Name/Address**

Amy Greer  
920 Miller Ave  
Shelbyville, KY 40065

6. Amy Greer, Install Coordinator, on 10/27/2023
7. I, Amy Greer, consent to serve as the registered agent on behalf of the this entity on 10/27/2023