

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

PAOI
1422376.09
Michael G. Adams
Secretary of State
Received and Filed
1/16/2025 12:00:00 AM
Fee receipt: \$40

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

Articles of Incorporation
Professional Service Corporation

KPS

Pursuant to KRS 14A, KRS 271B and KRS 274, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the professional service corporation is

E-TOWN SMILE CO. P.S.C.

Article II: The number of shares the corporation is authorized to issue is **50**

Article III: The name of the initial registered agent is

E-Town Smile Co.

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

551 Westport Rd Suite B, Elizabethtown, KY 42701

Article IV: The mailing address of the entity's principal office is

551 Westport Rd Suite B, Elizabethtown, KY 42701

Article V: The profession to be practiced through the professional service corporation is

dentists

Article VI: The names and street addresses of the original shareholders of the professional service corporation are:

Shareholder	Linel Holwager	119 Low Country Ct, Elizabethtown, KY 42701
Shareholder	Charles Holwager	119 Low Country Ct, Elizabethtown, KY 42701

Article VII: The name and mailing address of the incorporator is as follows:

Incorporator	Linel Holwager	119 Low Country Ct, Elizabethtown, KY 42701
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Article VIII: Each of the incorporators, shareholders, not less than one half (1/2) of the directors and each of the officers other than secretary or treasurer is a qualified person within the meaning of this chapter.

This filing will be effective on **Thursday, January 16, 2025**.

This entity is **NOT** a tobacco retailer as defined by KRS 438.305(9).

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

Signature of individual signing on behalf of **Incorporator: Linel D Holwager, DMD**

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I, **Linei D Holwager, DMD**, consent to sign
who serves as the Registered Agent on behalf of
Thursday, January 16, 2025.

