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Michael G. Adams Kentucky Secretary of State Received and Filed: 8/10/2023 3:13 PM Fee Receipt: \$0.00



COMMONWEALTH OF KENTUCKY MICHAEL ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Statement of Resignation of Re (Domestic or Foreign Business E		SRA
	KRS Chapter 14A and 271B, 273, 274, 275, and, for that purpose, submits the following state		ned applies for
1. I, Cogency Global, Inc.			, do hereby
resign as registered ag	ent; and/or		
discontinue the register	ed office address		
	Astinata Olinia BOC (#8997)	(00)	
2. The business entity which I	am resigning from is Activate Clinic, PSC (#09874 (The name must be identical to the	ne name on record with the Sec	cretary of State.)
3. The business is: a corp	oration (KRS 271B, KRS 273 or KRS 274);		
a limit	ed liability company (KRS 275);		
a limit	a limited partnership (KRS 362);		
a limit	a limited liability partnership (KRS 362); or		
a busi	ness trust (KRS 386)		
4. The business entity was org	anized and exists in the state or country of KY		·
5. The mailing address of the r	esigning agent:		
828 Lane Allen Road Ste. 219	Lexington	KY	40504
Street Address or Post Office Box N	umbers City	State	Zip
the date on which the staten			he 31 st day after
I dieclare under penalty of perju	ry under the law of Kentucky that the forgoing is	s true and correct.	
	Mark Thomas	8/10/202	3
Signature of Registered Agent	Printed Name	Date	