

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

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

**Articles of Organization
Professional Limited Liability Company**

PLC

1442180.06
Michael G. Adams
Secretary of State
Received and Filed
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LA00

Pursuant to KRS 14A and KRS 275, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the professional limited liability company is

WRIGHT FAMILY HEALTHCARE PLLC

Article II: The name of the initial registered agent is

Elizabeth Ivy Wright

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

5661 US Highway 62 W, Cynthiana, KY 41031

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

5661 US Highway 62 W, Cynthiana, KY 41031

Article IV: This entity is managed by **Members**.

Article V: The profession to be practiced through the professional limited liability company is

nurses

Article VI: This filing will be effective on **Thursday, March 27, 2025**.

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 **Organizer: Elizabeth Wright**

I, **Elizabeth Ivy Wright**, consent to serve as the Registered Agent on behalf of this entity on Thursday, March 27, 2025.