

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

N104
1013082.09
Michael G. Adams
Secretary of State
Received and Filed
1/14/2025 12:23:54 PM
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>

Certificate of Withdrawal

WFE

Pursuant to the provisions of KRS 14A.9-060, the foreign business entity executes the following certificate of withdrawal:

Article I: The name of the nonprofit corporation is

HOME CARE ASSOCIATION OF AMERICA, INC.

Article II: The state or country of formation is **Indiana**

Article III: The Secretary of State may forward to the business entity at the following street address any process served on the Secretary of State and commits to notify the Secretary of State of any future changes to this address.

444 NORTH CAPITOL ST. NW STE. 428, WASHINGTON, DC, 20001

Article IV: The business entity is not transacting business in the Commonwealth and surrenders its authority to transact business in the Commonwealth.

Article V: The business entity revokes the authority of its registered agent to accept service of process on its behalf and appoints the Secretary of State as its agent for service of process in any proceeding based on a cause of action arising during the time it was authorized to transact business in the Commonwealth. The business entity shall notify the Secretary of State in the future of any change in its mailing address.

Article VI: This filing will be effective on **Tuesday, January 14, 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 **President: Emma Dickison**
1/14/2025