

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of

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Alison Lundergan Grimes
Kentucky Secretary of State
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Alison Lundergan Grimes
Secretary of State
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Certificate of Existence

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

VASCULAR DISEASE TREATMENT CENTER, LLC

has eliminated all the grounds for dissolution, paid all fees and penalties owed to the Secretary of State, and met all other requirements for reinstatement. The Secretary of State hereby cancels the certificate of dissolution issued on November 2, 2010. The effective date of reinstatement is January 6, 2012.

I further certify that VASCULAR DISEASE TREATMENT CENTER, LLC is a limited liability company duly organized and existing under the laws of the Commonwealth of Kentucky, whose date of organization is August 25, 2006, and whose period of duration is perpetual.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 6th day of January, 2012.



Alison Lundergan Grimes

Alison Lundergan Grimes
Secretary of State
Commonwealth of Kentucky
0645683



Alison Lundergan Grimes
Secretary Of State
Filings Division
P.O. Box 718
Frankfort, KY 40602-0718

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IMPORTANT NOTICE

NOTICE

Keep this copy for your records

The image on the reverse side of this card serves as your confirmation and copy that the business filing submitted was successfully filed with the Office of the Secretary of State in accordance to Kentucky Revised Statutes.

How to obtain a full page copy of your business filing

To download full page copies of the document to take to the County Clerk's Office, please visit our web site at www.sos.ky.gov/online.htm. If you would like to request copies of the document from our office, please download the Records Request Form at www.sos.ky.gov/business/records and submit to our Records department.

If you have additional questions concerning your filing, please contact our office at 502-564-3490.

**VASCULAR DISEASE TREATMENT CENTER,
LLC
ONE W. MCDONALD PKWY
STE 3B
MAYSVILLE KY 41056**