Commonwealth of Kentucky Michael G. Adams, Secretary of St.

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

Certificate of Renewal of Assumed Name

RAN

47207577

Pursuant to the provisions of KRS 365.015(4), the undersigned hereby applies to renew an assumed name, and for that purpose, submits the following statements:

1. This certifies that the assumed name of the business entity is:

WAGNER CHIROPRACTIC

2. The assumed name is being renewed by:

Alexandria Physical Medicine, P.S.C.

4. The business entity is organized and existing in the state or country of

KY

4. The mailing address of the business entity is:

8333 ALEXANDRIA PIKE, ALEXANDRIA KY 41001

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

Michael Wagner 2/1/2023