

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

NAOI  
1415686.09  
Michael G. Adams  
Secretary of State  
Received and Filed  
12/16/2024 12:00:00 AM  
Fee receipt: \$8

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

**Articles of Incorporation**  
**Non-profit Corporation**

**NAI**

**Please Note:** This form does not automatically confer tax-exempt status. For additional information, contact the Internal Revenue Service prior to filing the Articles of Incorporation. Pursuant to KRS 14A and KRS 273, the undersigned hereby forms a nonprofit corporation and for that purpose sets forth the following:

Article I: The name of the nonprofit corporation is

**HEALTHCARE ESSENTIALS FOUNDATION Inc.**

Article II: The purpose of the nonprofit corporation is **provide support and programming for aspiring healthcare professionals to address critical workforce gaps**

Article III: The name of the initial registered agent is

**Lisa W. Walton**

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

**3135 Commerce Center Place, Louisville, KY 40211**

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

**3135 Commerce Center Place, Louisville, KY 40211**

Article V: The number of directors constituting the initial board of directors is **3**

The names and mailing addresses of the persons who are to serve as the initial board of directors are as follows:

<b>Director</b>	Lisa W Walton	3135 Commerce Center Place, Louisville, KY 40211
<b>Director</b>	Melissa Coleman	3135 Commerce Center Place, Louisville, KY 40211
<b>Director</b>	Ana Ivonne Lagunez Otero	100 Witherspoon St Suite 1044, Louisville, KY 40202

Article VI: The name and mailing address of the incorporator is as follows:

<b>Incorporator</b>	Lisa W Walton	3135 Commerce Center Place, Louisville, KY 40211
<b>Incorporator</b>	Melissa Coleman	3135 Commerce Center Place, Louisville, KY 40211

This filing will be effective on **Monday, December 16, 2024.**

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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 In  
**Walton**

I, **Lisa W. Walton**, consent to serve as the Registered Agent on behalf of this entity on Monday, December 16, 2024.

