

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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0643091.09
Michael G. Adams
Secretary of State
Received and Filed
12/26/2024 12:02:55 PM
Fee receipt: \$20

Michael G. Adams
Secretary of State
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Certificate of Assumed Name

ASN

Pursuant to the provisions of KRS 365, the undersigned applies to assume a name and, for that purpose, submits the following statement:

1. The assumed name is:

CONCORD HEALTH SYSTEMS MANAGEMENT GROUP

2. The name of the business entity that is adopting the assumed name:

CONCORD HEALTH SYSTEMS, INC.

3. The entity is organized and existing in the state or country of **KY**

4. The mailing address is:

2850 NORTH MAIN STREET, MADISONVILLE KY 42431

This filing will be effective on **Thursday, December 26, 2024.**

I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

Signature of individual signing on behalf of **President: James D. Lowry**

12/26/2024 12:02:55 PM