

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

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Michael G. Adams  
KY Secretary of State  
Received and Filed

10/26/2022 12:00:00 AM

Fee receipt: \$134.00

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

**Certificate of Authority**

**RCA**

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

1. The business entity is a profit corporation.
2. The name of the entity is: Landmark Healthplan of California Inc.
3. The name of the entity to be used in Kentucky is (if applicable):
4. It is an entity organized and existing under the laws of the state of California.
5. The date of organization is 8/17/1994 and the period of duration is perpetual

**Principal Office**

4175 WESTPORT ROAD  
SUITE 201  
Louisville, KY 40207-3137

**Registered Agent Name/Address**

George W Vieth Jr  
4175 WESTPORT RD  
SUITE 201  
Louisville, KY 40207

6. As the Authorized Representative, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. George Vieth Jr. on 10/26/2022

7. As the Registered Agent, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. George W Vieth Jr on 10/26/2022