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

0802999 0802999 Michael G. A..... Received and Filed

9/29/2023 12:00:00 AM Fee receipt: \$810.00

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 14A9 - 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 limited liability company.
- 2. The name of the entity is: PHYSICIAN MANAGEMENT SERVICES OF KENTUCKY, LLC
- 3. The name of the entity to be used in Kentucky is (if applicable): KENTUCKY PHYSICIANS SERVICES, LLC
- 4. It is an entity organized and existing under the laws of the state of Florida.
- 5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

Principal Office

3113 LAWTON RD., STE#250 ORLANDO, FL 32803

Registered Agent Name/Address

Corporation Service Company 421 West Main Street Frankfort, KY 40601

Members/Managers

Member	Casey B Deloach	3113 Lawton Road, Suite 250, Orlando, Florida 32803
Member	Brett Kennefick	3113 Lawton Road, Suite 250, Orlando, Florida 32803

- 6. James McGinn, CFO, on 9/29/2023
- 7. I, Corporation Service Company, consent to serve as the registered agent on behalf of the this entity on 9/29/2023