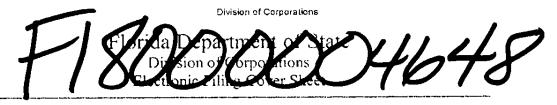
10/1/2018



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180002843743)))



H160002843743ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

FOREIGN PROFIT/NONPROFIT CORPORATION CENTERSTONE OF KENTUCKY, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu Corporate Filing Menu

Help

PLEASE HONOR ORIGINAL DATE 10-01-18

19542080845 From Ranae McGraw

PLEASE HONOR ORIGINAL DATE 10-01-18



October 3, 2018

FLORIDA DEPARTMENT OF STATE Division of Corporations

CT

SUBJECT: CENTERSTONE OF KENTUCKY, INC.

REF: W18000087789

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please verify the filing type. The purpose appears to be for a Profit.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist II FAX Aud. #: H18000284374 Letter Number: 718A00020535

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

	OF KENTUCKY, INC.		DD 4777 DAIR	indiana at tita
(Name of corporation import in language as in the name at presen	n: must include the word "INCORPOI s will clearly indicate that it is a corpo at. "Company" or "Co." may not be us	RATED" or "CORPO tration instead of a med as a corporate suf	JRATION" or words or subreve stural person or partnership if a lix by a nonprofit corporation.)	ot so contained
(If name unavailabl	e in Florida, enter alternate corporate	name adopted for th	e purpose of transacting busine	ss in Florida)
Keńnicky		31-0939757		
(State or country t	under the law of which it is incorporate	ed) N*	(FEI number, if applicable)	
6/28/1978	of Incorporation)	5. Perpetual		
(Date)	of Incorperation)	(Duration: Y	ear corp, will cease to exist or	"perpenial")
(Date first conducted	affairs in Florida if prior to registration	n. See sections 617.13	01 & 617,1502, F.S. to determin	ne penalty liability.)
10101 LINN STAT	TION ROAD SUITE 600 LOUISVIL	LE, KY 40223		
	(Princ	ipal office address)		
			·	
	(Cu	ment mailing address	.)	
MentalHealth	Facility			
e Memairicanni R	oration authorized in home state or co			
(Purpose(s) of corpo	oration authorized in home state or co	untry to be carried o	ut in the state of Florida)	
(1 	address of Florida registered agent	r (P.O. Boy NOT	occentable)	
			as out passing,	. (
Name:	CT Corporation System. 1200 South Pine Island Road	 		
	1200 South Pine Island Road		•	
Office Address:	No			
	Plantation	, Florida _	33324	
	(Çlıy)		(Zip Code)	
Having been namedesignated in this of	ent's acceptance: d as registered agent and to accep pplication, I hereby accept the ap imply with the provisions of all sto miliar with and accept the obliga	ποιτρά ερμοτάνει το τε	te braner una comuncte acti	oration at the place of in this capacity. I formance of my
-			Cambinalization	a Assi Secretary
	C T Corporation System (Regi	due Priatar	n canoneer ignima.	, , , , , , , , , , , , , , , , , , , ,
Ву:	(# 2	<u> </u>		
	(Regi	stered agent's signatu	ire j	
11 Augobading	crtificate of existence duly authority of State, by the Secretary of State	ticated not more t	han 90 days prior to delivery	of this application t

12. Names and addresses of officers and/or directors	
A. DIRECTORS	
Michael Abate Chaliman:	
Address:	
Louisville, KY 40223	 _
Robert Watson Vice Chairman:	
12200 Ridge Rd. Address:	
Louisville, KY 40223	········
Director:	
7823 Montero Drive Address:	
Prospect, KY 40059	<u> </u>
Director:	2 -
Address:	
	- [
B. OFFICERS	至う
Presidenti Dr. Anthony Zipple	<u> </u>
10101 Linn Station Road, Suite 600 Address:	······································
Louisville, KY 40223	
Vice President:	
Address:	
Tia Coatley Secretary:	
7823 Monteru Drive, Prospect, KY 40059 Address:	
David Ray Treasurer:	
Address: 513 Lake Forest Parkway, Louisville KY 40245	
NOTE: If necessary, for that attach an addendum or the application listing additional officers and (Signature of Chairman, Vice Chairman, of any officer listed in number 12 of the application.)	
Anthony Zipple	
(Typed or printed name and dapacity of person signing application)	

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

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

Certificate of Existence

Authentication number: 207519

Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

CENTERSTONE OF KENTUCKY, INC.

is a corporation duly incorporated and existing under KRS Chapter 14A and KRS Chapter 273, whose date of incorporation is June 28, 1978 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that Articles of Dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF. I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 27th day of September, 2018, in the 227th year of the Commonwealth.



Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

207519/0110202