

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

N101

0934215.09
Alison Lundergan Grimes
Secretary of State
Received and Filed
10/9/2015 12:00:00 AM
Fee receipt: \$90.00

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

Certificate of Authority
Foreign Business Entity

FBE

Pursuant to the provisions of KRS Chapter 14A and KRS Chapter 273 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 entity is a **nonprofit** corporation.
2. The name of the entity is **Global Academy of Emergency Medicine, Inc INC.**
3. The name of the entity to be used in Kentucky is **Global Academy of Emergency Medicine, Inc Inc.**
4. The state or country under whose law the entity is organized is **Delaware.**
5. The date of organization is **3/15/2013.**
6. The mailing address of the entity's principal office is **201 E MAIN ST STE 1405, Lexington, KY 40507.**
7. The street address of the entity's registered office in Kentucky is **201 E MAIN ST STE 1405, Lexington, KY 40507** and the name of the registered agent in that office is **AMR Management Services.**
8. The names and business addresses of the entity's representatives:

Anita Bhavnani 201 E MAIN ST STE 1405, Lexington, KY 40507
9. I certify that, as of the date of filing of this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.
10. This application will be effective on filing.

Signature of Authorized Representative:
Nick Ruffin

I, **AMR Management Services**, consent to serve as the
Registered Agent on behalf of the business entity.

Signature of Registered Agent or individual signing on behalf of
the company serving as Registered Agent:

Nick Ruffin