

6/23/2021  
0027391

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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

**Statement of Change of  
Registered Office, Registered  
Agent, or Both**

**RAC**

Pursuant to the provisions of KRS chapters 271B, 273, 275, or 362, the undersigned hereby applies to change the registered office, registered agent, or both on behalf of

**KENTUCKY ASSOCIATION OF CHIROPRACTORS, INCORPORATED**

which is organized in the state of Kentucky, and for that purpose submits the following statements:

**1. Name of current registered agent**

NICK PAYNE

**2. Registered agent is hereby changed to:**

Rachel Wendt

**3. Address of current registered office**

7349 BURLINGTON PIKE  
FLORENCE, KY 41042

**4. Registered office is hereby changed to:**

4390 Clearwater Way #104  
Lexington, KY 40515

**5. Signature of officer or chairman of the board**

Rachel Wendt, Executive Director  
Signature and Title  
Type or print name and title  
6/23/2021 9:12 AM  
Date

**6. Consent of new agent**

I consent to serve as the new registered agent on behalf of this corporation.  
Rachel Wendt  
Signature and Title  
Type or print name and title