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

1439100 Michael G. Adams Received and Filed

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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 **Principal Office Address**

**POC** 

L905

Pursuant to the provisions of KRS 14A.5-010, the undersigned hereby applies to change the principal office on behalf of

## WELLNESS CARE PHARMACY, LLC

and for that purpose submits the following statements:

1. Address of current principal office 2. Principal office is hereby changed to:

7801 DELIGHTFULL WAY LOUSIVILLE, KY 40291	9616 TAYLORSVILLE ROAD Suite-B LOUSIVILLE, KY 40291

3. Authorized Signature of Entity

Dev Subedi, Member	
Sgnature and Title	N g
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Type or print name and title	VIDE
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Date	OND