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

0826401 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

JENCARE NEIGHBORHOOD MEDICAL CENTER WEST BROADWAY, LLC

and for that purpose submits the following statements:

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

1395 NW 167 STREET	1395 NW 167th Street
MAMI, FL 33169	Mami Gardens, FL 33169

3. Authorized Signature of Entity

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Christopher Cl	hen, Manager
Signature a	and Title
Christopher Cl	nen, Manager
Type or print n	ame and title
6/18/2	2024
Dat	e Name and the second