

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

0970703  
Michael G. Adams  
KY Secretary of State  
Received and Filed

5/17/2024 8:22:40 PM

Fee receipt: \$10.00

L905

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**

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

**LOUISVILLE EYE ANESTHESIA, LLC**

and for that purpose submits the following statements:

**1. Address of current principal office**

1A BURTON HILLS BLVD  
NASHVILLE, TN 37215

**2. Principal office is hereby changed to:**

1A BURTON HILLS BLVD  
Suite 300  
NASHVILLE, TN 37215

**3. Authorized Signature of Entity**

*Paige Reber*, Secretary

Signature and Title

Paige Reber, Secretary

Type or print name and title

5/17/2024

Date