

**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  
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**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

**AMERICA'S HEALTH CARE/RX PLAN AGENCY, INC.**

and for that purpose submits the following statements:

**1. Address of current principal office**

1100 NORTHWEST COMPTON DR. #205  
BEAVERTON, OR 97006

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

450 W Hanes Mill Road, Ste 101  
Winston-Salem, NC 27105

**3. Authorized Signature of Entity**

*Lori Marsh, Paralegal*

Signature and Title

Lori Marsh, Paralegal

Type or print name and title

6/29/2023

Date