

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

1021104.09

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Michael G. Adams Kentucky Secretary of State Received and Filed: 3/31/2025 3:01 PM

Fee Receipt: \$10.00

Pursuant to the provisions of KRS 14A and KRS 271B, 273, 274, 275, 362 or 386 the undersigned hereby applies to change the principal office address on behalf of HAYNEEDLE, INC. and for that purpose submits the follo (The name must be identical to the name on record with the Secretary of State.) 1. Principal office address currently on file: Principal office is hereby changed to: DMAHA, NE 68114 BENTONVILLE, AR 72716 BENTONVILLE, AR 72716 BENTONVILLE, AR 72716	Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490	Statement of Change of	Principal Office Address	POC
The name must be identical to the name on record with the Secretary of State.) 1. Principal office address currently on file: 9394, STE. 300 WEST DODGE RD. OMAHA, NE 68114 Principal office is hereby changed to: 1 CUSTOMER DR BENTONVILLE, AR 72716	change the principal office addre		•	, ,,
9394, STE. 300 WEST DODGE RD. OMAHA, NE 68114 I CUSTOMER DR BENTONVILLE, AR 72716	(The name must be identical to the na	on record with the Secretary of Str		cubilities the renowing.
WEST DODGE RD. OMAHA, NE 68114 BENTONVILLE, AR 72716	1. Principal office address cur	ntly on file:	Principal office is hereby change	<u>jed to:</u>
OMAHA, NE 68114	9394, STE. 300	7	1 CUSTOMER DR	
	WEST DODGE RD.		BENTONVILLE, AR 72716	
Fee: The fee for this filing is \$10.	OMAHA, NE 68114			
	Fee: The fee for this filing is \$*			
I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.	I declare under penalty of perjun	ınder the laws of the state of K	Centucky that the foregoing is true a	and correct.
X /s/ Geoffrey Edwards Geoffrey Edwards 3/26/2025 Signature of Authorized Agent Printed Name Date	^			