## **PPOC**

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

0235205 Michael G. Adams Received and Filed

5/30/2021 2:21:35 AM Fee receipt: \$10.00

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 chapters 271B, 273, 275, or 362, the undersigned hereby applies to change the principal office on behalf of

## **FUN TIME DAY CARE, INC.**

which is organized in the state of Kentucky, and for that purpose submits the following statements:

1. Address of current principal office	2. Principal office is hereby changed to:
222 E WITHERSPOON ST	5351 N Dixie Hwy
UNIT 705	Elizabethtown, KY 42701
LOUISVILLE, KY 40202	

3. Signature of officer or chairman of the board

Tammi M Hall, President	
Signature and Title	113
Type or print name and title	9/1/2
5/30/2021 2:21 AM	DEN
Date	