

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams Kentucky Secretary of State Received and Filed: 12/27/2024 2:42 PM Fee Receipt: \$10.00

Date

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490	Statement of Change of Principal Office Address POC			
visionworks doctors of (The name must be identical to the na	ess on behalf of DPTOMETRY, INC. une on record with the Secre	tary of State.		
Principal office address cur	rently on file:	<u> </u>	rincipal office is hereby changed to:	Flore
175 E HOUSTON ST SAN ANTONIO TX 78205			19100 Ridgewood Parkway, Building 1, 7th Floor San Antonio, TX 78259	
Fee: The fee for this filing is \$10.				
I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.				
x Lin Lifell		Li	sa Hill 12	2-27-24

Printed Name

Signature of Authorized Agent