

**Commonwealth of Kentucky**  
**Alison Lundergan Grimes, Secretary of State**

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Alison Lundergan Grimes  
KY Secretary of State  
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NPOC

Alison Lundergan Grimes  
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

**KENTUCKY ACADEMY OF CHILD AND ADOLESCENT PSYCHIATRY, INC.**

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

**1. Address of current principal office**

496 SOUTHLAND DRIVE  
LEXINGTON, KY 40503

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

245 Fountain Ct  
Suite 225  
Lexington, KY 40509

**3. Signature of officer or chairman of the board**

Amy L Meadows, Secretary/Treasurer

Signature and Title

Type or print name and title

3/27/2019 4:38 PM

Date