

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

0440820  
Michael G. Adams  
KY Secretary of State  
Received and Filed

8/8/2024 10:45:29 AM

Fee receipt: \$10.00

P601

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 14A.5-010, the undersigned hereby applies to change the principal office on behalf of

**CHERYL'S EYE OF THE NEEDLE OF LEXINGTON, INC.**

and for that purpose submits the following statements:

**1. Address of current principal office**

3344 PARTNER PLACE STE 1  
LEXINGTON, KY 40503

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

3323 PARTNER PLACE STE 10  
LEXINGTON, KY 40503

**3. Authorized Signature of Entity**

*Cheryl Murphy, President*

Signature and Title

Cheryl Murphy, President

Type or print name and title

8/8/2024

Date