## L906

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

0959720 Michael G. Adams Received and Filed

3/31/2021 6:24:56 PM 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

## **BEARD DENTAL, LLC**

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:
401 HOFFMAN DRIVE	1621 S Green St
SUITE C	HENDERSON, KY 42420
HENDERSON, KY 42420	

3. Signature of officer or chairman of the board

Jay P Beard, Sole Member	17.
Signature and Title	
Type or print name and title	112
3/31/2021 6:24 PM	DED
Date	