

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

0671322  
Michael G. Adams  
KY Secretary of State  
Received and Filed

L905

6/22/2023 12:48:59 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 14A.5-010, the undersigned hereby applies to change the principal office on behalf of

**OVERLOOK TERRACES GP, LLC**

and for that purpose submits the following statements:

**1. Address of current principal office**

1469 SOUTH FOURTH STREET  
SUITE 100  
LOUISVILLE, KY 40208

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

545 S 3rd Street  
LOUISVILLE, KY 40202

**3. Authorized Signature of Entity**

*Chris Dischinger, Manager*

Signature and Title

Chris Dischinger, Manager

Type or print name and title

6/22/2023

Date