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

1095222 Michael G. Adams Received and Filed

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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** 

L905

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

## TURTLE TREE CLINIC, PLLC

and for that purpose submits the following statements:

1. Address of current principal office

2. Principal office is hereby changed to:

501 BAXTER AVE SUITE 100 LOUISVILLE, KY 40204 501 BAXTER AVE SUITE 125 LOUISVILLE, KY 40204

3. Authorized Signature of Entity

Jonathan Day, Member	
Signature and Title	1 5
Jonathan Day, Member	
Type or print name and title	IDEL
6/3/2024	
Date	M