

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

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**Michael G. Adams**  
**KY Secretary of State**  
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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**

Pursuant to the provisions of KRS chapters 271B, 273, 275, or 362, the undersigned hereby applies to change the principal office on behalf of

**HEMISPHERE SWIM FLORENCE, LLC**

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

**1. Address of current principal office**

1501 WASHINGTON AVENUE SOUTH, SUITE 300  
MINNEAPOLIS, MN 55454

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

983 E. Hennepin Avenue  
MINNEAPOLIS, MN 55414

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

John Reilly, Chief Executive Officer

Signature and Title

Type or print name and title

5/26/2021 12:17 PM

Date