

**Commonwealth of Kentucky**  
**Alison Lundergan Grimes, Secretary of State**

0476828  
Alison Lundergan Grimes  
KY Secretary of State  
Received and Filed  
2/3/2018 5:53:26 PM  
Fee receipt: \$10.00

PPOC

Alison Lundergan Grimes  
Secretary of State  
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**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

**HEART CARE ASSOCIATES, P.S.C.**

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

**1. Address of current principal office**

44 MCCOY AVE BOX 9  
MADISONVILLE, KY 42431

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

345 PIN OAK LANE  
MADISONVILLE, KY 42431

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

Bhaskaran Sreekumar, President

Signature and Title

Type or print name and title

2/3/2018 5:53 PM

Date