

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

1185330  
Michael G. Adams  
KY Secretary of State  
Received and Filed

L906

**10/12/2023 2:00:47 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

**All In 1 Medical Billing and Provider Credentialing Services, LLC**

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

**1. Address of current principal office**

1935 S HURSTBOURNE PARKWAY  
SUITE 1055

LOUISVILLE, KY 40220

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

9707 El Prado St  
Louisville, KY 40272

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

Stephanie Gail Hall

Signature and Title

Type or print name and title

10/12/2023 2:00 PM

Date