## L905

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

1031031 Michael G. Adams Received and Filed

3/25/2024 9:49:05 AM 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

## **Best Care Medical Clinic, LLC**

and for that purpose submits the following statements:

2. Principal office is hereby changed to:
701 S. Dixie Hwy
Cave City, KY 42127

3. Authorized Signature of Entity Russell England, Owner/Provider Signature and Title Russell England, Owner/Provider Type or print name and title 3/25/2024