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

1198934 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** 

**NPOC** 

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

## Bluegrass Elite Healthcare, Inc.

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

1. Address of current principal office	2. Principal office is hereby changed to:
3453 KY HWY 2565	2248 Long Branch Rd
Louisa, KY 41230	Louisa, KY 41230
3. Signature of officer or chairman of the boa	ard
Alex Cain Moore	
Signature and Title	
08/0	
Type or print name and title	100 CAN / A372 /
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