## L906

## Commonwealth of Kentucky Michael G. Adams, Secretary of St

1186035 Michael G. Adams KY Secretary of State 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** 

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

## **Healing Hands Health Center, LLC**

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.
1464 W Cumberland Gap Pkwy	1321 Cumberland Falls Highway
Corbin, KY 40701	Suite 300
	Corbin, KY 40701

3. Signature of officer or chairman of the board

Kristina Broughton

Signature and Title

Type or print name and title

10/3/2022 4:32 PM

Date