

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

**0966046**  
**Alison Lundergan Grimes**  
**KY Secretary of State**  
Received and Filed  
**6/4/2018 11:10:06 AM**  
**Fee receipt: \$10.00**

**L906**

Alison Lundergan Grimes  
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

**WILSON THERAPEUTICS, LLC**

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

**1. Address of current principal office**

17 W Southern Ave  
Covington, KY 41015

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

17 W Southern Ave  
Covington, KY 41015

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

Aimee Lynne Wilson, Authorized Rep 6/4/2018

Signature and Title

Type or print name and title

6/4/2018 11:10 AM

Date