Commonwealth of Kentucky Elaine N. Walker, Secretary of Sta

0682650 Elaine N. Walker Secretary of State Received and Filed

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Elaine N. Walker 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

L906

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

APPALACHIAN ANESTHESIA AND ANALGESIA SERVICES, PLLC

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:
100 JOHN SUTHERLAND DRIVE SUITE: 6	204 SOMERSLY PLACE LEXINGTON, KY 40515
NICHOLASVILLE, KY 40356	
3. Signature of officer or chairman of the board	
MAZHAR RASUL, MEMBER MANAGER Signature and Title	
Signature and Title	
Type or print name and title	
9/8/2011 11:57 AM	WE FEE STATES
Date	