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

0990953 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** 

L905

Pursuant to the provisions of KRS 14A.5-010, the undersigned hereby applies to change the principal office on behalf of

## NEWSOME THERAPEUTIC PRACTICE, PLLC

and for that purpose submits the following statements:

1. Address of current principal office

2. Principal office is hereby changed to:

535 WEST SECOND STREET SUITE 207 LEXINGTON, KY 40508

201 Price Road Suite 106 LEXINGTON, KY 40511

3. Authorized Signature of Entity

Benjamin Newsome, Owner Signature and Title Benjamin Newsome, Owner Type or print name and title 6/21/2024 Date