

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

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**Alison Lundergan Grimes**  
**KY Secretary of State**  
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Alison Lundergan Grimes  
Secretary of State  
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Frankfort, KY 40602-0718  
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**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

**OWL EMERGENCY PHYSICIANS, LLC**

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

**1. Address of current principal office**

1A BURTON HILLS BLVD  
NASHVILLE, TN 37215

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

7700 W. SUNRISE BOULEVARD  
PLANTATION, FL 33322

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

CRAIG A. WILSON, SECRETARY

Signature and Title

Type or print name and title

6/24/2019 10:21 AM

Date