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

1307357 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

## **Shively First Health Care L.L.C.**

and for that purpose submits the following statements:

1. Address of current principal office 2. Principal office is hereby changed to:

3934 Dixie Hwy Ste 420	3934 Dixie Hwy Ste 320
Louisville, KY 40216	Louisville, KY 40216

3. Authorized Signature of Entity

Mary Pantess, owner	
Signature and Title	N E
Mary Pantess, owner	, (2
Type or print name and title	VIDER
7/25/2024	OFD
Date	MA