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

(502) 564-3490 http://www.sos.ky.gov

ROBERT S. COHEN FAMILY LIMITED PARTNERSHIP

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:
743 BROOKHILL DR. LEXINGTON, KY 40502	153 Patchen Drive Suite 51 LEXINGTON, KY 40517
3. Signature of officer or chairman of the board Harry S Cohen, President Signature and Title	CRY
Type or print name and title	
6/2/2011 10:58 AM Date	WE FALLEN
	et as