

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

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Michael G. Adams  
KY Secretary of State  
Received and Filed

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Michael G. Adams  
Secretary of State  
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Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

**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

**1st class distribution Limited Liability Company**

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

**1. Address of current principal office**

3357 Cove Lake Dr Apt 223  
Lexington, KY 40515

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

3357 Cove Lake Dr Apt 223  
3363 cove lake dr Apt 521  
Lexington, KY 40515

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

Anthony Garrett

Signature and Title

Type or print name and title

11/12/2021 1:19 PM

Date