## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes
KY Secretary of State
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Alison Lundergan Grimes 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** 

L906

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

## TRILOGY HEALTHCARE OF JEFFERSON II, LLC

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

1. Address of current principal office	2. Principal office is hereby changed to:
366 N HURSTBOURNE PKWY STE 200 LOUISVILLE, KY 40222	303 N HURSTBOURNE PKWY STE 200 LOUISVILLE, KY 40222
3. Signature of officer or chairman of the board	
Bradley A. Williamson, Annual Report Signer	
Signature and Title	
Type or print name and title	10 //SA Y
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