## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes
KY Secretary of State

KY Secretary of State Received and Filed

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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

## FAMILY EYEHEALTH CENTER, LLC

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:
1894 DECLARATION DRIVE INDEPENDENCE, KY 41051	1824 DECLARATION DRIVE INDEPENDENCE, KY 41051
3. Signature of officer or chairman of the board	
Craig S. Pennell, President	
Signature and Title	
Type or print name and title	
6/20/2012 10:25 AM	DIVE FP (A)
Date	WE WE