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

0664362 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

## **VIVID IMAGINATIONS CHILD CARE CENTER, LLC**

and for that purpose submits the following statements:

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

5925 SIX MILE LN	10536 VISTAVIEW DRIVE
LOUISVILLE, KY 40218	LOUISVILLE, KY 40291

3. Authorized Signature of Entity

LAMECA YANKEY, OWNER Signature and Title LAMECA YANKEY, OWNER Type or print name and title 7/16/2024 Date