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

Pursuant to the provisions of KRS 14A.5-010, the undersigned hereby applies to change the principal office on behalf of

## **TRUENORTH TREATMENT CENTER, LLC**

and for that purpose submits the following statements:

1811 MCCREARY AVENUE       121 EAST 2ND STREET         OWENSBORO, KY 42301       121 EAST 2ND STREET         SUITE 401       OWENSBORO, KY 42303         3. Authorized Signature of Entity         LAUREN MORRISON, MEMBER       Signature and Title         LAUREN MORRISON, MEMBER       Type or print name and title         7/7/2023 5:39 PM       Date	1. Address of current principal office	2. Principal office is hereby changed to:
LAUREN MORRISON, MEMBER Sgnature and Title LAUREN MORRISON, MEMBER Type or print name and title 7/7/2023 5:39 PM		SUITE 401
Signature and Title         LAUREN MORRISON, MEMBER         Type or print name and title         7/7/2023 5:39 PM	3. Authorized Signature of Entity	
LAUREN MORRISON, MEMBER Type or print name and title 7/7/2023 5:39 PM	LAUREN MORRISON, MEMBER	
Type or print name and title 7/7/2023 5:39 PM	Sgnature and Title	
7/7/2023 5:39 PM	LAUREN MORRISON, MEMBER	
	Type or print name and title	AND AND
Date	7/7/2023 5:39 PM	ED WE SUBSU
Date	- Date	

L906

Received and Filed

7/7/2023 5:39:18 PM

POC

Fee receipt: \$10.00