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

## **EAP Therapy LLC**

ddress of current principal office	2. Principal office is hereby changed to:
Patchen Dr ngton, KY 40517	109 MERLIN DRIVE LEXINGTON, KY 40517
uthorized Signature of Entity Elisha Johnson, Owner Sgnature and Title	
Elisha Johnson, Owner	
Elisha Johnson, Owner Sgnature and Title	
Elisha Johnson, Owner <sup>Sgnature and Title</sup> Elisha Johnson, Owner	DED WE FALL AND

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Received and Filed

6/1/2022 1:14:33 PM

POC

Fee receipt: \$10.00