## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

0559370 Alison Lundergan Grimes KY Secretary of State Received and Filed

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## **Statement of Change of Principal Office Address**

**POC** 

**PPOC** 

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

## KENTUCKIANA ORAL & MAXILLOFACIAL SURGERY ASSOCIATES, P.S.C.

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:
225 ABRAHAM FLEXNER WAY STE 302	2800 Cannons Lane LOUISVILLE, KY 40205
LOUISVILLE, KY 40202	
3. Signature of officer or chairman of the board	
Christopher E. Noonan, Vice President	
Signature and Title	
Type or print name and title	S AS Y