## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes
KY Secretary of State
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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

## **BLUEGRASS HOME HEALTH CARE, 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:
1795 ALYSHEBA WAY SUITE 7105 LEXINGTON, KY 40509	2333 Alexandria Dr. LEXINGTON, KY 40504
3. Signature of officer or chairman of the board	
Melissa Boggs, Owner	
Signature and Title	
Type or print name and title	
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Date	WE ON THE STATE OF