

**Commonwealth of Kentucky**  
**Alison Lundergan Grimes, Secretary of State**

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Alison Lundergan Grimes  
KY Secretary of State  
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Alison Lundergan Grimes  
Secretary of State  
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Frankfort, KY 40602-0718  
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**Statement of Change of  
Principal Office Address**

**POC**

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 Healthcare Management Group Limited Liability Company**

which is organized in the state of Kentucky, and for that purpose submits the following statements:

**1. Address of current principal office**

4226 Allmond Avenue  
Louisville, KY 40209

**2. Principal office is hereby changed to:**

P. O. Box 22789  
Louisville, KY 40252

**3. Signature of officer or chairman of the board**

Kim Farley, Manager

Signature and Title

Type or print name and title

8/13/2013 1:53 PM

Date