## L906

## **Commonwealth of Kentucky** Michael G. Adams, Secretary of St. KY Secretary of State

1120573 Michael G. Adams Received and Filed 6/28/2021 6:14:05 PM

Fee receipt: \$10.00

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**

**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

## FRIENDSHIP HEALTH, 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:
7400 FRIENDSHIP DRIVE	400 W Market St Ste 2000
PEWEE VALLEY, KY 40056	Louisville, KY 40202
3. Signature of officer or chairman of the boar	d
Scott Edens	
Signature and Title	
	B S Y
Type or print name and title	
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