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

THE LAKE DOCTORS, INC.

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

1. Address of current principal office	2. Principal office is hereby changed to:
4997 MORVEN ROAD	3543 State Road 419
JACKSONVILLE, FL 32210	Winter Springs, FL 32708
3. Signature of officer or chairman of the boa	ard
John Palmer Clarkson	
Signature and Title	
Type or print name and title	Dra ser Alla
7/19/2021 11:41 AM	SED WE CONTRACT
Date	
	NO ATCOSTON

PPOC

1128183

Michael G. Adams

Received and Filed

7/19/2021 11:41:48 AM

POC

Fee receipt: \$10.00