

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

0544287.06

mmoore POC

Michael G. Adams Kentucky Secretary of State Received and Filed:

9/28/2023 2:48 PM Fee Receipt: \$10.00

| Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 | Statement of Ch | nange of F | rincipal Office Addres | ss POC | |
|---------------------------------------------------------------------------------------------------------------|-------------------------|----------------|---------------------------------------------|-----------------------|--|
| Pursuant to the provisions of KF change the principal office address | ess on behalf of | 3, 273, 274, 2 | 75, 362 or 386 the undersign | ned hereby applies to | |
| Avesis Third Party Administrators, LLC (The name must be identical to the name on record with the Secretary) | | | and for that purpose submits the following: | | |
| Principal office address cur | | • | erincipal office is hereby c | hanged to: | |
| 10400 North 25th Ave | | \neg | 1275 W. Washington Street | | |
| Suite 200 | | | Suite 102 | | |
| Phoenix, AZ 85021 | | - | Tempe, AZ 85281 | | |
| Fee: The fee for this filing is \$ | 10. | <u>-</u> .] · | | | |
| I declare under penalty of perjui | y under the laws of the | e state of Ke | ntucky that the foregoing is t | rue and correct. | |
| x Garrett M. | Heenan | (| Garrett M. Heenan | 9/20/23 | |
| Signature of Authorized Agent | | P | rinted Name | Date | |