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

0799091 Michael G. Adams Received and Filed

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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** 

**PPOC** 

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

## Northern Kentucky Pain Relief Physical Medicine Center, P.S.C.

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:
8119 Connector Drive	7560 US Hwy 42
Florence, KY 41042	Florence, KY 41042
3. Signature of officer or chairman of the boar	d la de la desiración d
Richard Dammel, owner	
Signature and Title	
Type or print name and title	
12/2/2020 8:43 AM	OFD WE YELLOW
Date	WE WILL WILLIAM