

**Commonwealth of Kentucky  
Trey Grayson, Secretary of State**

**0669099**  
Trey Grayson  
Secretary of State  
Received and Filed  
**5/10/2010 7:00:16 PM**  
Fee receipt: \$10.00

**L906**

Trey Grayson  
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

**FAMILY CARE DENTISTRY PLLC**

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

**1. Address of current principal office**

6733 ELMCROFT CIRCLE  
LOUISVILLE, KY 40241

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

13320 Shelbyville Road  
LOUISVILLE, KY 40223

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

Michelle Moore, Bookkeeper

Signature and Title

Type or print name and title

5/10/2010 7:00 PM

Date