5/25/2016 0034808		Commonwealth of Kentucky Indergan Grimes, Secretary o	Received and Filed	
Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490			Fee receipt:	11:53:39 AM \$10.00
		Statement of Change on Registered Office, Registe Agent, or Both		RAC

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

## **GREATER LOUISVILLE MEDICAL SOCIETY FOUNDATION, INC.**

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

(502) 564-3490 http://www.sos.ky.gov

2. Registered agent is hereby changed to:
BERT GUINN
4. Registered office is hereby changed to:
101 WEST CHESTNUT STREET LOUISVILLE, KY 40202

5. Signature of officer or chairman of the board	6. Consent of new agent
K THOMAS REICHARD, PRESIDENT	I consent to serve as the new registered agent on behalf of this corporation.
	BERT GUINN
Type or print name and title	Signature and Title
5/25/2016 11:53 AM	Type or print name and title