## 5/25/2016 0889810

## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes KY Secretary of State Received and Filed

5/25/2016 10:41:59 AM Fee receipt: \$10.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

1. Name of current registered agent

## Statement of Change of Registered Office, Registered Agent, or Both

2. Registered agent is hereby changed to:

**RAC** 

L905

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

## **Integrated Medical Solutions, LLC**

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

Tom Huhn	Tom Huhn
3. Address of current registered office	4. Registered office is hereby changed to:
501 Darby Creek Suite 29 Lexington, KY 40509	300 S. 13th Street Suite 100 Louisville, KY 40203
5. Signature of officer or chairman of the board	6. Consent of new agent
Thomas M Huhn, member Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Thomas M. Huhn Signature and Title
Type or print name and title	Cignitial and Title
5/25/2016 10:41 AM  Date	Type or print name and title