## 4/22/2019 Commonwealth of Kentucky 0584529 Alison Lundergan Grimes, Secretary of State Received and Filed

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

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

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

## TANDEM SOLUTION, LLC

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

1. Name of current registered agent	2. Registered agent is hereby changed to:
JOHN ECKEN	William T Frantz
3. Address of current registered office	4. Registered office is hereby changed to:
17609 CURRY BRANCH ROAD LOUISVILLE, KY 40245	9913 Shelbyville Road Suite 200 Suite 200 Louisville Louisville, KY 40223-4007

5. Signature of officer or chairman of the board	6. Consent of new agent
William T Frantz, President	I consent to serve as the new registered agent on behalf of this corporation.
129/00	William T Frantz
Type or print name and title	Signature and Title
4/22/2019 9:51 AM	Type or print name and title
Date	

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4/22/2019 9:51:46 AM Fee receipt: \$10.00

RAC