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Commonwealth of Kentucky  
Elaine N. Walker, Secretary of State

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Elaine N. Walker  
Secretary of State  
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Elaine N. Walker  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

Statement of Change of  
Registered Office, Registered  
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

**PARTNERS IN DENTISTRY, LLC**

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

**1. Name of current registered agent**

MARIJA SASEK-BAUTISTA, DMD

**2. Registered agent is hereby changed to:**

MARIJA SASEK-BAUTISTA, DMD

**3. Address of current registered office**

225 ABRAHAM FLEXNER WAY  
SUITE 302  
LOUISVILLE, KY 40202

**4. Registered office is hereby changed to:**

3935 DuPont Circle  
SUITE B  
LOUISVILLE, KY 40207

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

Marija Sasek-Bautista, DMD, Member  
Signature and Title

Type or print name and title

6/14/2011 10:24 AM

Date

**6. Consent of new agent**

I consent to serve as the new registered agent on behalf of this corporation.

Marija Sasek-Bautista, DMD

Signature and Title

Type or print name and title