## 6/12/2018 1013837

## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

1013837 Alison Lundergan Grimes KY Secretary of State

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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

## **Schulten Pediatric Dentistry - Frankfort LLC**

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

| Schulten Pediatric Dentistry LLC                 | Kentuckiana Dental Health Specialists, LLC                                    |
|--|---|
| 3. Address of current registered office          | 4. Registered office is hereby changed to:                                    |
| 2809 Alta Vista Ct<br>Louisville, KY 40206       | 111 Diagnostic Drive<br>Frankfort, KY 40601                                   |
| 5. Signature of officer or chairman of the board | 6. Consent of new agent   |
| Jenna Schulten, Member Signature and Title       | I consent to serve as the new registered agent on behalf of this corporation. |
|  | Jenna Schulten  |
| Type or print name and title                     | Signature and Title   |
| 6/12/2018 2:10 PM Date                           | Type or print name and title  |