

7/27/2016
0929040

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

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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>

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

PEACHSTATE HEALTH MANAGEMENT, LLC

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

1. Name of current registered agent

BRIAN K. STAPLES

2. Registered agent is hereby changed to:

BRIAN K. STAPLES

3. Address of current registered office

371 UNITED CT.
#7
LEXINGTON, KY 40509

4. Registered office is hereby changed to:

436 Marsailles Road
VERSAILLES, KY 40383

5. Signature of officer or chairman of the board

WILLIAM HENRY, CHIEF OPERATING OFFICER

Signature and Title

Type or print name and title

7/27/2016 4:33 PM

Date

6. Consent of new agent

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

BRIAN K. STAPLES

Signature and Title

Type or print name and title