| 10/28/2015 0891942 | Commonwealth of Kentucky | 0891942 Alison Lundergan G |
|-----------------------|--------------------------------------|-------------------------------|
| | Alison Lundergan Grimes, Secretary o | KY Secretary of Stat |

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

Alison Lundergan Grimes KY Secretary of State Received and Filed 10/28/2015 7:41:09 AM Fee receipt: \$10.00

RAC

N601

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

YURYS THERAPY CENTER Corp

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: |
|--|---|
| CORPORATION SERVICE COMPANY D/B/A CSC- LAWYERS INCO | Corporation Service Company |
| | |

| 3. Address of current registered office | 4. Registered office is hereby changed to: | |
|---|---|--|
| 421 WEST MAIN STREET FRANKFORT, KY 40601 | 421 WEST MAIN STREET FRANKFORT, KY 40601 | |
| | | |
| | | |
| | | |

| 6. Consent of new agent |
|---|
| I consent to serve as the new registered agent on behalf of this corporation. |
| Jackie Smetana, VP |
| Signature and Title |
| Type or print name and title |
| |