1/26/2012 0441143	Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o		0441143 Alison Lundergan Grimes KY Secretary of State Received and Filed 1/26/2012 8:36:09 AN		L905
Alison Lundergan Grimes Secretary of State		Statement of Change o	Fee receipt:		
P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490		Registered Office, Registered RA Agent, or Both		RAU	•

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

## PEDIATRIC ASSOCIATES OF ELIZABETHTOWN, P.L.L.C.

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

(502) 564-3490 http://www.sos.ky.gov

1. Name of current registered agent	2. Registered agent is hereby changed to:
D. MICHAEL COYLE	D. MICHAEL COYLE
3. Address of current registered office	4. Registered office is hereby changed to:
2935 DOLPHIN DRIVE SUITE 102 ELIZABETHTOWN, KY 42701	2413 RING ROAD, SUITE 117 ELIZABETHTOWN, KY 42701

5. Signature of officer or chairman of the board	6. Consent of new agent
Marquita H. Ball, Member Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
Type or print name and title	Signature and Title
1/26/2012 8:36 AM	Type or print name and title