Pursuant to the provisions of KRS chapters 271B, 273, 275, or 362, the undersigned hereby applies to change the principal office on behalf of

KENTUCKY HEALTHCARE MANAGEMENT, INC.

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

1. Address of current principal office	2. Principal office is hereby changed to:
3209 E. INDIAN TRAIL LOUISVILLE, KY 40213	5424 NEW CUT RD 5424 NEW CUT RD Louisville Louisville, KY 40214
3. Signature of officer or chairman of the board yoleidis vazquez, President Signature and Title Type or print name and title 3/13/2018 11:44 AM Date	WE FALL MAR