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Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes KY Secretary of State Received and Filed

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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

P601

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

CLARKSVILLE LIMB & BRACE & REHAB, INC.

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

1. Name of current registered agent	2. Registered agent is hereby changed to:
ROYCE G WATSON	BRAD WATSON
3. Address of current registered office	4. Registered office is hereby changed to:
1711 ASHLEY CIRCLE	1711 ASHLEY CIRCLE
SUITE 8	SUITE 8
BOWLING GREEN, KY 42104	BOWLING GREEN, KY 42104
5. Signature of officer or chairman of the board	6. Consent of new agent
	I consent to serve as the new registered agent on behalf
BRAD WATSON, PRESIDENT	of this corporation.
Signature and Title	PRAP WATCOM
1/45.11(0)(0)	BRAD WATSON
Type or print name and title	Signature and Title
6/27/2019 3:51 PM	
0/2//2019 3.31 PW	Type or print name and title