7/3/2017 0898960

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes KY Secretary of State Received and Filed

7/3/2017 12:58:31 PM Fee receipt: \$10.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

1. Name of current registered agent

Statement of Change of Registered Office, Registered Agent, or Both

2. Registered agent is hereby changed to:

RAC

L905

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

TRIPLE D CLINIC, LLC

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

BRENDA DESIMONE	BRENDA DESIMONE
3. Address of current registered office	4. Registered office is hereby changed to:
704 COLUMBIA HIGHWAY GREENSBURG, KY 42743	7790 Marshall Ridge Rd GREENSBURG, KY 42743
5. Signature of officer or chairman of the board	6. Consent of new agent
Brenda DeSimone, Registered Agent 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
7/3/2017 12:58 PM Date	Type or print name and title