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Commonwealth of Kentucky  
Alison Lundergan Grimes, Secretary of State

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Alison Lundergan Grimes  
KY Secretary of State  
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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

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

**WELLNESS MEDICAL AND REHABILITATION CENTER, Inc.**

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

**1. Name of current registered agent**

ARLES PERDOMO

**2. Registered agent is hereby changed to:**

Ronald Diaz

**3. Address of current registered office**

4229 BARDSTOWN RD ANNEX BUILDING  
LOUISVILLE, KY 40218

**4. Registered office is hereby changed to:**

4229 BARDSTOWN RD ANNEX BUILDING  
LOUISVILLE, KY 40218

**5. Signature of officer or chairman of the board**

ronald diaz, president  
Signature and Title

Type or print name and title

12/20/2013 3:25 PM  
Date

**6. Consent of new agent**

I consent to serve as the new registered agent on behalf of this corporation.

Ronald Diaz  
Signature and Title

Type or print name and title