## 12/18/2016 0964366

## 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** 

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

## Baribeault Anesthesia L.L.C.

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

1. Name of current registered agent	2. Registered agent is hereby changed to:
Thomas Baribeault	THOMAS BARIBEAULT
3. Address of current registered office	4. Registered office is hereby changed to:
802 Corbitt Dr Wilmore, KY 40390  5. Signature of officer or chairman of the board	6005 Old South Dr Richmond, KY 40475
	6. Consent of new agent
Thomas Baribeault, Authorized Rep	I consent to serve as the new registered agent on behalf of this corporation.
	Thomas Baribeault
Type or print name and title	Signature and Title
12/18/2016 3:11 PM	Type or print name and title
Date	