## 11/19/2017 0944378

## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

0944378

Alison Lundergan Grimes KY Secretary of State Received and Filed

11/19/2017 10:25:29 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

## **Peak Performance Medical, LLC**

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

David Stone	David Ellison
3. Address of current registered office	4. Registered office is hereby changed to:
4229 Bardstown Road Suite 214 Louisville, KY 40218	13806 Lake Pointe Circle, Unit 101 Louisville, KY 40223
5. Signature of officer or chairman of the board	6. Consent of new agent
David Ellison, Member Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
	David Ellison
Type or print name and title	Signature and Title
11/19/2017 10:25 PM Date	Type or print name and title