## 2/1/2018 **Commonwealth of Kentucky** 0944378 0944378 Alison Lundergan Grimes, Secretary o **KY Secretary of State** Received and Filed

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 or **Registered Office, Registered** Agent, or Both

Alison Lundergan Grimes 2/1/2018 3:21:07 PM Fee receipt: \$10.00

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:

1. Name of current registered agent	2. Registered agent is hereby changed to:
DAVID ELLISON	Legal Services Group, LLC.
3. Address of current registered office	4. Registered office is hereby changed to:
13806 LAKE POINTE CIRCLE, UNIT 101 LOUISVILLE, KY 40223	3131 S 2nd St Louisville, KY 40208

5. Signature of officer or chairman of the board	6. Consent of new agent
Curtis Shain, Authorized Rep 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
2/1/2018 3:21 PM	Type or print name and title