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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

CROLEY FAMILY & COSMETIC DENTISTRY, PLLC

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

1. Name of current registered agent

MATTHEW R. CROLEY, DMD

2. Registered agent is hereby changed to:

MATTHEW R. CROLEY, DMD

3. Address of current registered office

977 JOUETT CREEK DRIVE
LEXINGTON, KY 40509

4. Registered office is hereby changed to:

1065 Dove Run Rd Suite 1
LEXINGTON, KY 40502

5. Signature of officer or chairman of the board

Matthew R. Croley DMD, owner
Signature and Title

Type or print name and title

2/20/2012 8:32 AM
Date

6. Consent of new agent

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

Matthew R. Croley DMD
Signature and Title

Type or print name and title