## Commonwealth of Kentucky Michael G. Adams, Secretary of Sti KY Secretary of State

0926993 Michael G. Adams Received and Filed

5/11/2020 12:04:07 PM Fee receipt: \$10.00

Michael G. Adams 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 or 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

## **Professional Physical Therapy Clinic LLC**

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

ANDREW MORRICE NANKWENYA	ANDREW MORRICE NANKWENYA
3. Address of current registered office	4. Registered office is hereby changed to:
3415 BARDSTOWN RD SUITE 307 LOUISVILLE, KY 40218	2300 Meadow Drive, suite 201. louisville, KY 40218
5. Signature of officer or chairman of the board	6. Consent of new agent
andrew Morrice nankwenya, Director	I consent to serve as the new registered agent on behalf of this corporation.
Signature and Title	andrew Morrice nankwenya
Type or print name and title	Signature and Title
5/11/2020 12:04 PM	Type or print name and title
Date	- 1, pe s. p.int hamo and allo