

5/8/2019
0064803

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

MUSCULAR DYSTROPHY ASSOCIATION, INC.

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

1. Name of current registered agent

C T CORPORATION SYSTEM

2. Registered agent is hereby changed to:

INCORP SERVICES, INC.

3. Address of current registered office

306 W MAIN ST
SUITE 512
FRANKFORT, KY 40601

4. Registered office is hereby changed to:

828 LANE ALLEN ROAD
SUITE 219
LEXINGTON, KY 40504

5. Signature of officer or chairman of the board

MICHAEL J. KENNEDY, CFO

Signature and Title

Type or print name and title

5/8/2019 3:37 PM

Date

6. Consent of new agent

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

KATHRYN PICKETT

Signature and Title

Type or print name and title