

6/9/2021  
0064803

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
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Michael G. Adams  
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**

INCORP SERVICES, INC.

**2. Registered agent is hereby changed to:**

NORTHWEST REGISTERED AGENT, LLC

**3. Address of current registered office**

828 LANE ALLEN ROAD  
SUITE 219  
LEXINGTON, KY 40504

**4. Registered office is hereby changed to:**

212 N. 2ND STREET, STE 100  
RICHMOND, KY 40475

**5. Signature of officer or chairman of the board**

ELLEN O'CONNOR VOS, PRESIDENT

Signature and Title

Type or print name and title

6/9/2021 12:14 PM

Date

**6. Consent of new agent**

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

TOM GLOVER / MANAGER

Signature and Title

Type or print name and title