Commonwealth of Kentucky 0542938 Michael G. Adams, Secretary of Sti 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 on 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

MOUNTAIN MEDICAL EQUIPMENT, INC.

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:
JULIE L. ROSE	URS AGENTS, LLC
3. Address of current registered office	4. Registered office is hereby changed to:
1181 HWY 119 NORTH WHITESBURG, KY 41858	306 WEST MAIN STREET STE 512 FRANKFORT, KY 40601

5. Signature of officer or chairman of the board	6. Consent of new agent
Jana Ray, Authorized Signor	I consent to serve as the new registered agent on behalf of this corporation.
Signature and Title	Kanetha Bishop, Asst. Secretary
Type or print name and title	Signature and Title
7/9/2020 2:08 PM	Type or print name and title
Date	

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