## 6/17/2018 0998247

## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes KY Secretary of State Received and Filed

6/17/2018 3:03:53 PM Fee receipt: \$10.00

Alison Lundergan Grimes 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 of 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

## Pain Relief Centers, LLC

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

Mitch Couvillion	Ana Maria Tiltmann Lynch
3. Address of current registered office	4. Registered office is hereby changed to:
5905 Brentwood Dr Crestwood, KY 40014	Pain Relief Centers 5129 Dixie Hwy, Suite 201 Louisville, KY 40216
5. Signature of officer or chairman of the board	6. Consent of new agent
Daniel Lynch, Secretary  Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
	Ana Maria Tiltmann Lynch
Type or print name and title	Signature and Title
6/47/2049 2:02 DM	
6/17/2018 3:03 PM Date	Type or print name and title