

4/11/2016
0514568

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

0514568
Alison Lundergan Grimes
KY Secretary of State
Received and Filed
4/11/2016 9:35:01 AM
Fee receipt: \$10.00

P601

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

TOTAL REHAB CENTER, P.S.C.

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

1. Name of current registered agent

TERRY RANDALL

2. Registered agent is hereby changed to:

Michael A. Coldiron

3. Address of current registered office

175 MEDPARK DR
SOMERSET, KY 42503

4. Registered office is hereby changed to:

175 MEDPARK DR
SOMERSET, KY 42503

5. Signature of officer or chairman of the board

Michael A. Coldiron, Owner/Partner
Signature and Title

Type or print name and title

4/11/2016 9:35 AM
Date

6. Consent of new agent

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

Michael A. Coldiron
Signature and Title

Type or print name and title