4/8/2014
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Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary o

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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

KY MEDS INC.

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

1. Name of current registered agent

ROBERT M. HOPPE

2. Registered agent is hereby changed to:

ROBERT M. HOPPE

3. Address of current registered office

11509 SHELBYVILLE ROAD
SUITE D
LOUISVILLE, KY 40243

4. Registered office is hereby changed to:

704 EXECUTIVE PARK
LOUISVILLE, KY 40207

5. Signature of officer or chairman of the board

ROBERT HOPPE, OWNER
Signature and Title

Type or print name and title

4/8/2014 3:33 PM
Date

6. Consent of new agent

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

Signature and Title

Type or print name and title