## 3/2/2017 0521716

## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes KY Secretary of State Received and Filed

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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** 

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

## **GRABER INSEALATORS OF LOUISVILLE, LLC**

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:
HERSHEL L. GRABER	HERSHEL L. GRABER
3. Address of current registered office	4. Registered office is hereby changed to:
11608 ELECTRON DR LOUISVILLE, KY 40299	10301 Jefferson Street LOUISVILLE, KY 40299
5. Signature of officer or chairman of the board	6. Consent of new agent
Hershel Graber, Member Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
	Hershel Graber
Type or print name and title	Signature and Title
3/2/2017 11:47 AM	Type or print name and title
Date	Type of print name and the