2/10/2015 0832020		Commonwealth of Kentucky Indergan Grimes, Secretary o	Received and Filed	
Alison Lunde	rgan Grimes	Statement of Change a	2/10/2015 5 Fee receipt:	
Secretary P. O. B		Statement of Change of Registered Office, Registered		RAC

P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Registered Office, Registered Agent, or Both

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

Kade Rentals Limited Liability Company

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:
John C Bowlin	Kristi Bowlin
3. Address of current registered office	4. Registered office is hereby changed to:
3. Address of current registered office	4. Registered office is hereby changed to.
412 Second Street Paintsville, KY 41240	414 Hollowcreek Road Mount Sterling, KY 40353

5. Signature of officer or chairman of the board	6. Consent of new agent
Kristi Bowlin, Member Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
	Kristi Bowlin
Type or print name and title	Signature and Title
2/10/2015 5:56 PM	Type or print name and title
Date	