## 8/15/2017 **Commonwealth of Kentucky** 0887827 Alison Lundergan Grimes 0887827 Alison Lundergan Grimes, Secretary o **KY Secretary of State** Received and Filed 8/15/2017 10:25:12 AM

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 or **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

## **Customer Care Services 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:    |
|---|--|
| Rhonda Miller                           | Rhonda Miller                                |
| 3. Address of current registered office | 4. Registered office is hereby changed to:   |
| 4432 West Hwy 80<br>Somerset, KY 42503  | 2430 Monticello Street<br>Somerset, KY 42501 |
|   |  |

| 5. Signature of officer or chairman of the board | 6. Consent of new agent   |
|--|---|
| Randy C. Wahlman, member                         | I consent to serve as the new registered agent on behalf of this corporation. |
|  | Rhonda Miller   |
| Type or print name and title                     | Signature and Title   |
| 8/15/2017 10:25 AM<br>Date                       | Type or print name and title  |

L905

Fee receipt: \$10.00

RAC