10/27/2015 0674159	Commonwealth of Kentucky Indergan Grimes, Secretary o	Received and Filed	
Alison Lunder	Statement of Change o	Fee receipt:	\$ 10:56:14 AM \$10.00
Secretary P. O. Bo	Provisional Office Provision		RAC

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

GROWERS NATIONAL COOPERATIVE INSURANCE AGENCY, INC.

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

Frankfort, KY 40602-0718

(502) 564-3490 http://www.sos.ky.gov

1. Name of current registered agent	2. Registered agent is hereby changed to:	
CORPORATION SERVICE COMPANY D/B/A CSC- LAWYERS INCORPORATING SERVICE COMPANY	Corporation Service Company	

3. Address of current registered office	4. Registered office is hereby changed to:
421 WEST MAIN STREET FRANKFORT, KY 40601	421 WEST MAIN STREET FRANKFORT, KY 40601

5. Signature of officer or chairman of the board	6. Consent of new agent	
Jackie Smetana, VP Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.	
	Jackie Smetana, VP	
Type or print name and title	Signature and Title	
10/27/2015 10:56 AM	Type or print name and title	