## 11/27/2013 0838182

## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

0838182
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

1. Name of current registered agent

## Statement of Change or Registered Office, Registered Agent, or Both

2. Registered agent is hereby changed to:

**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

## **HIS & HERS CARRY OUT LLC**

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

United States Corporation Agents, Inc.	Bobby Rawe
3. Address of current registered office	4. Registered office is hereby changed to:
9900 CORPORATE CAMPUS DRIVE SUITE 3000 LOUISVILLE, KY 40223	301 W. 34th st covington, KY 41015
5. Signature of officer or chairman of the board	6. Consent of new agent
Ron Richard, Member Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
	Bobby Rawe
Type or print name and title	Signature and Title
11/27/2013 9:01 PM Date	Type or print name and title