## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes
KY Secretary of State
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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 Principal Office Address**

**POC** 

**PPOC** 

Pursuant to the provisions of KRS chapters 271B, 273, 275, or 362, the undersigned hereby applies to change the principal office on behalf of

## LOVEWELL INSURANCE AGENCY, INC

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

1. Address of current principal office	2. Principal office is hereby changed to:
9733 OLD THIRD STREET RD LOUISVILLE, KY 40272	9804 3rd STREET RD LOUISVILLE, KY 40272
3. Signature of officer or chairman of the board	
Karla Lovewell, President	
Signature and Title	
Type or print name and title	
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