## Commonwealth of Kentucky Michael G. Adams, Secretary of Sti KY Secretary of State

0524329 Michael G. Adams Received and Filed

4/15/2021 3:12:53 PM Fee receipt: \$10.00

Michael G. Adams 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** 

P601

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

## CMS INSURANCE AGENCY, INC.

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

JENNIFER NUGENT	Registered Agents Inc
3. Address of current registered office	4. Registered office is hereby changed to:
224 TREE TOP DRIVE BUTLER, KY 41006	212 N. 2nd St. STE 100 Richmond, KY 40475
5. Signature of officer or chairman of the board	6. Consent of new agent
Riley Park, Authorized Agent Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
1 2 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Bill Havre
Type or print name and title	Signature and Title
4/15/2021 3:12 PM	Type or print name and title
Date	