12/18/2014 0790229		commonwealth of Kentucky ndergan Grimes, Secretary o	Received and Filed	
Alison Lunder	gan Grimes	Statement of Change a	Fee receipt:	1:35:21 PM \$10.00
Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490		Statement of Change o r 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

NORTHERN KENTUCKY MASTER GARDENERS ASSOCIATION, INC.

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

http://www.sos.ky.gov

1. Name of current registered agent	2. Registered agent is hereby changed to:
ANDREA DEE	Bill Reis
3. Address of current registered office	4. Registered office is hereby changed to:
10990 MARSHALL ROAD COVINGTON, KY 41015	10990 MARSHALL ROAD COVINGTON, KY 41015
6	

5. Signature of officer or chairman of the board	6. Consent of new agent
Bill Reis, Chair Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
	Bill Reis
Type or print name and title	Signature and Title
12/18/2014 1:35 PM Date	Type or print name and title