10/27/2015 0650188		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 of State P. O. Box 718		Registered Office Registe		RAC

P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Registered Office, Registered Agent, or Both

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

KING & ASSOCIATES INSURANCE, LLC

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

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	

6. Consent of new agent	
I consent to serve as the new registered agent on behalf of this corporation.	
Jackie Smetana, VP	
Signature and Title	
Type or print name and title	