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Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary o

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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

Statement of Change of 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

LYKINS INSURANCE AND FINANCIAL SERVICES INC.

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

1. Name of current registered agent

JACK W. LYKINS

2. Registered agent is hereby changed to:

JACK W. LYKINS

3. Address of current registered office

1795 ALYSHEBA WAY, SUITE 6101
LEXINGTON, KY 40509

4. Registered office is hereby changed to:

2420 rockminster rd
LEXINGTON, KY 40509

5. Signature of officer or chairman of the board

jack w lykins, president
Signature and Title

Type or print name and title

4/8/2014 2:47 PM
Date

6. Consent of new agent

I consent to serve as the new registered agent on behalf of this corporation.

jack w lykins
Signature and Title

Type or print name and title