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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 on Registered Office, Registered Agent, or Both

RAC

N601

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

EQUESTRIAN EVENTS, INC.

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

1. Name of current registered agent	2. Registered agent is hereby changed to:
LISA BALL	LEE CARTER
3. Address of current registered office	4. Registered office is hereby changed to:
4054 ECLIPSE DRIVE LEXINGTON, KY 40511	4054 ECLIPSE DRIVE LEXINGTON, KY 40511
5. Signature of officer or chairman of the board	6. Consent of new agent
LISA BALL, PRESIDENT Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
	LEE CARTER
Type or print name and title	Signature and Title
6/14/2012 2:33 PM	Type or print name and title
Date	Type of print name and the