9/28/2017 0281467	Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o		Received and F	gan Grimes If State iled	1601
	ergan Grimes	Statement of Change of	Fee receipt:	11:01:24 AM \$10.00	
Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490		Statement of Change on 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

CONSUMER CREDIT COUNSELING SERVICE OF THE MIDWEST, INC.

which is organized in the state of Ohio, 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:
National Registered Agents, Inc.	Corporation Service Company
3. Address of current registered office	4. Registered office is hereby changed to:
306 W. MAIN STREET SUITE 512 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.
Corporation Service Company
Signature and Title
Type or print name and title