10/26/2015 0497582		ommonwealth of Kentucky dergan Grimes, Secretary o	rimes, Secretary o KY Secretary of State Received and Filed	
Alison Lundergan Grimes		Statement of Change o	10/26/2015 3:03:46 PM Fee receipt: \$10.00	

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

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

DOUGLAS COUNTY INSURANCE SERVICES, INC.

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

1. Name of current registered agent	2. Registered agent is hereby changed to:
CSC-LAWYERS INCORPORATING SERVICE	Corporation Service Company
	4. Pasiatored office is hereby chosened to:

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

5. Signature of officer or chairman of the board	6. Consent of new agent
Jackie Smetana, VP	I consent to serve as the new registered agent on behalf of this corporation.
	Jackie Smetana, VP
Type or print name and title	Signature and Title
10/26/2015 3:03 PM Date	Type or print name and title