10/28/2015 0925590		nmonwealth of Kentucky ergan Grimes, Secretary	0925590 Alison Lundergan Grimes	05
Alison Lundergan Grimes		Statement of Change	10/28/2015 8:21:45 AM 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

## FAIRFIELD COUNTY BANK INSURANCE SERVICES, LLC

which is organized in the state of Delaware, 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
3. Address of ourrent registered office	A Registered office is hereby changed to:

3. Address of current registered office	1.25	4. Registered office is hereby changed to:
421 WEST MAIN STREET		421 WEST MAIN STREET
FRANKFORT, KY 40601		FRANKFORT, KY 40601
	1 1/2	
	lltra?tr	
	17.	

5. Signature of officer or chairman of the board	6. Consent of new agent
Jackie Smetana, VP Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
100	Jackie Smetana, VP
Type or print name and title	Signature and Title
10/28/2015 8:21 AM	Type or print name and title