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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 or 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

MICHAEL BOONE & ASSOCIATES, 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:
	MONICA BOONE
3. Address of current registered office	4. Registered office is hereby changed to:
13400 EASTPOINT CENTER DRIVE LOUISVILLE, KY 40223	1302 Clear Springs Trace Suite 100 LOUISVILLE, KY 40223

5. Signature of officer or chairman of the board	6. Consent of new agent
Michael J Boone, Vice President Signature and Title	I consent to serve as the new registered agent on behalf of this corporation.
Type or print name and title	Signature and Title
2/3/2016 10:35 AM Date	Type or print name and title