Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Statement of Change of **Principal Office Address**

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Pursuant to the provisions of KRS chapters 271B, 273, 275, or 362, the undersigned hereby applies to change the principal office on behalf of

CARE INSURANCE, LLC

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

1. Address of current principal office	2. Principal office is hereby changed to:
9300 SHELBYVILLE ROAD, SUITE 204 LOUISVILLE, KY 40222	13109 Eastpoint Park Blvd.
	Louisville, KY 40223
3. Signature of officer or chairman of the board	
Gregory Cook, Managing Member Signature and Title	
Type or print name and title	
2/10/2021 11:38 AM	L WE EP AND
Date	