## **Commonwealth of Kentucky** Michael G. Adams, Secretary of St. KY Secretary of State

0493303 Michael G. Adams Received and Filed

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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**

**POC** 

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Pursuant to the provisions of KRS 14A.5-010, the undersigned hereby applies to change the principal office on behalf of

## **EUCLID INSURANCE SERVICES, INC.**

and for that purpose submits the following statements:

1. Address of current principal office 2. Principal office is hereby changed to:

234 SPRING LAKE DRIVE	234 SPRING LAKE DRIVE
ITASCA, L 60143	ΓΓΑSCA, IL 60143-3202

3. Authorized Signature of Entity

Mary Pettey, Authorized Person	
Sgnature and Title	116
Mary Pettey, Authorized Person	
Type or print name and title	1000
5/27/2024	
Date	11