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

1063007 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** 

L905

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

## LAKEVIEW HOUSEHOLD INSURANCE SOLUTIONS, LLC

and for that purpose submits the following statements:

1. Address of current principal office

4425 PONCE DE LEON BLVD, FL 2, #300

Attn: PAYROLL

CORAL GABLES, FL 33146

2. Principal office is hereby changed to:

4425 PONCE DE LEON BOULEVARD 5TH FLOOR

CORAL GABLES, FL 33146

3. Authorized Signature of Entity

Brian E. Bomstein, Authorized Person

Signature and Title

Brian E. Bomstein, Authorized Person

Type or print name and title

7/18/2024

Date