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 of Principal Office Address

POC

PPOC

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

## CAVALLO NERO INSURANCE, INC.

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:    |
|--|--|
| 9900 CORPORATE CAMPUS DRIVE<br>SUITE 3000        | 2333 Alexandria Drive<br>Lexington, KY 40504 |
| LOUISVILLE, KY 40223                             |  |
|  |  |
|  |  |
|  |  |
| 3. Signature of officer or chairman of the board |  |
| Douglas W. Butler, Jr., Attorney-in-Fact         |  |
| Signature and Title                              |  |
| Type or print name and title                     |  |
| 4/14/2014 3:03 PM                                | WE FALLARS                                   |
| Date   | WE   |
|  | 057 682 200                                  |
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|  |  |