

**Commonwealth of Kentucky**  
**Elaine N. Walker, Secretary of State**

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Elaine N. Walker  
Secretary of State  
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Elaine N. Walker  
Secretary of State  
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Frankfort, KY 40602-0718  
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<http://www.sos.ky.gov>

**Statement of Change of  
Principal Office Address**

**POC**

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

**SMITTY'S MOBILE HOME PARK LLC**

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

**1. Address of current principal office**

1433 COMBS ROAD  
HAZARD, KY 41702

**2. Principal office is hereby changed to:**

PO Box 135 1433 Combs Road  
HAZARD, KY 41702

**3. Signature of officer or chairman of the board**

Lois E Smith, Member

Signature and Title

Type or print name and title

4/13/2011 5:36 PM

Date