## Commonwealth of Kentucky Elaine N. Walker, Secretary of Sta

0338319 Elaine N. Walker Secretary of State Received and Filed

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Elaine N. Walker 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** 

NPOC

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

## **ELKHORN CITY FIREMEN'S AUXILIARY, 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:
P.O. BOX 427	P.O. BOX 1626
ELKHORN CITY, KY 41522	ELKHORN CITY, KY 41522
3. Signature of officer or chairman of the board	
P. I. W. L. C. Printer	
Paula Worley, Vice President Signature and Title	
Signature and Time	
Tune or print pame and fills	BY SALL MARK Y
Type or print name and title	
6/29/2011 9:57 PM	EN WE TO ANSO
Date	11/12/1/20