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

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

## FCHCN INSURANCE AGENCY, INC.

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

1. Address of current principal office	2. Principal office is hereby changed to:
3333 W. COMMERCIAL BLVD SUITE 103 FT LAUDERDALE, FL 33309-3407	2338 W Royal Palm Rd Ste J Phoenix, AZ 85021
3. Signature of officer or chairman of the board Joel Slakman, President Signature and Title	R
Type or print name and title	
6/12/2017 11:13 AM Date	WE FALLER
	CH COS

PPOC

6/12/2017 11:13:20 AM Fee receipt: \$10.00

POC