## L906

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

0664232 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

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

## THE HOMETOWN INSURANCE AGENCY, LLC

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 chan	ged to:
142 FRANK STREET	1139 CHERRY KNOLL ROAD	
STAFFORDSVILLE, KY 41256	LOUISA, KY 41230	
3. Signature of officer or chairman of the bo	ard	

GLADYS V CASSADY, MEMBER Signature and Title Type or print name and title 6/23/2021 10:57 PM