

## Detra Reed

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**From:** Wren, Angela (PPC) <Angela.Wren@ky.gov>  
**Sent:** Thursday, November 18, 2021 11:46 AM  
**To:** Detra Reed  
**Subject:** RE: Name Approval

The name of the business is acceptable.

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**From:** Simpson, Mary A (PPC) <Mary.Simpson@ky.gov>  
**Sent:** Thursday, November 18, 2021 12:42 PM  
**To:** Wren, Angela (PPC) <Angela.Wren@ky.gov>  
**Subject:** FW: Name Approval

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Please check this to see if what to be done.

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**From:** PPC DOI Licensing Mail <[DOI.LicensingMail@ky.gov](mailto:DOI.LicensingMail@ky.gov)>  
**Sent:** Thursday, November 18, 2021 10:18 AM  
**To:** Simpson, Mary A (PPC) <[Mary.Simpson@ky.gov](mailto:Mary.Simpson@ky.gov)>; PPC DOI Licensing Mail <[DOI.LicensingMail@ky.gov](mailto:DOI.LicensingMail@ky.gov)>  
**Subject:** FW: Name Approval

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**From:** Detra Reed <[dreed@centrallicensingbureau.com](mailto:dreed@centrallicensingbureau.com)>  
**Sent:** Thursday, November 18, 2021 9:38 AM  
**To:** PPC DOI Licensing Mail <[DOI.LicensingMail@ky.gov](mailto:DOI.LicensingMail@ky.gov)>  
**Subject:** Name Approval

**\*\*CAUTION\*\* PDF attachments may contain links to malicious sites. Please contact the COT Service Desk [ServiceCorrespondence@ky.gov](mailto:ServiceCorrespondence@ky.gov) for any assistance.**

Please see attached.

Detra Reed  
TPA Division  
Central Licensing Bureau, Inc.  
(501)664-8044 ext 236  
[www.centrallicensingbureau.com](http://www.centrallicensingbureau.com)

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## Detra Reed

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**From:** Detra Reed  
**Sent:** Thursday, November 18, 2021 8:38 AM  
**To:** 'DOI Licensing Mail'  
**Subject:** Name Approval  
**Attachments:** 0887\_001

Please see attached.

Detra Reed  
TPA Division  
Central Licensing Bureau, Inc.  
(501)664-8044 ext 236  
[www.centrallicensingbureau.com](http://www.centrallicensingbureau.com)

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**Central Licensing Bureau, Inc.**

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W.H.L. WOODYARD IV  
President

November 18, 2021

Kentucky Insurance Department  
500 Metro Street, 2 SE 11  
Frankfort, KY 40601

RE: NAME APPROVAL

Dear Sir/Madam:

This is to request approval for use of the name "**HRS Insurance Services, LLC**" in your state. The Limited Liability Company is domiciled in the State of Washington and would like to become licensed for insurance in your state. The Limited Liability company is currently in the business of insurance functioning as a non-resident insurance agency.

I would appreciate your prompt attention to this request and should you have any question, please do not hesitate to contact me.

**Please return request to my attention at the email address provided.**

Sincerely,

Detra Reed  
Licensing Coordinator

/dr

Enclosures