

COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams Kentucky Secretary of State Received and Filed: 8/10/2022 10:40 AM Fee Receipt: \$40.00

FCA

Division of Business Filings
P.O. Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

Amended Certificate of Authority
(Foreign Business Entity)

(502) 564-3490 www.sos.ky.gov	,				
		hapter KRS 14A.9 - 040 the und below and, for that purpose, so			amended certificate o
1. The busines	profe limit	it corporation essional service corporation ed liability company essional limited liability company ed cooperative association ir	bus limi sta	nprofit corpora siness trust ited partnersh tutory trust n-profit LLC	
2. The name o	of the company is: Rea	llogy Insurance Agency, Ind	D		·
		e name must be identical to the na			State.)
		g under the laws of the state or o		nusetts	·
4. The entity re	eceived authority to tran	sact business in Kentucky on $\underline{5}$	/9/2005	,	
	as changed its (check al				
	Domicile name to Anywhere Insurance Agency Inc.				
	Name to be used in Kentucky to Anywhere Insurance Agency Inc.				
	Jurisdiction of organization to				
	Period of duration				
	Form of organization				
	Management type:	Member managed	Manager m	anaged	
6. This applica	tion will be effective up	on filing.			
I declare unde	r penalty of perjury und	er the laws of the state of Kentu	cky that the foregoing	ງ is true and ເ	correct.
Law Uller		Lauren Underwood	Special Se	ecretary	08/10/2022
Signature of Auth	horized Representative	Printed Name	Title		Date