## **PPOC**

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

0492157 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

## **BOB BECK INSURANCE, 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:
8011 NEW LAGRANGE RD STE 3	8011 NEW LAGRANGE RD STE 5
LOUISVILLE, KY 40222	LOUISVILLE, KY 40222
	<b>高</b> 4
II de la Alice	

3. Signature of officer or chairman of the board

Robert Beck, President	
Signature and Title	
Type or print name and title	71.
6/9/2021 1:33 PM	DED
Date	