

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

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Michael G. Adams  
KY Secretary of State  
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Michael G. Adams  
Secretary of State  
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<http://www.sos.ky.gov>

**Statement of Change of  
Principal Office Address**

**POC**

Pursuant to the provisions of KRS 14A.5-010, the undersigned hereby applies to change the principal office on behalf of

**TECHNOLOGY INSURANCE ASSOCIATES LLC**

and for that purpose submits the following statements:

**1. Address of current principal office**

225 GORDONS CORNER ROAD 1 H  
MANALAPAN, NJ 07726

**2. Principal office is hereby changed to:**

225 GORDONS CORNER ROAD 2B  
MANALAPAN, NJ 07726

**3. Authorized Signature of Entity**

*Benjamin Levenson, Director of Operations*

Signature and Title

Benjamin Levenson, Director of Operations

Type or print name and title

3/16/2023

Date