## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes
KY Secretary of State
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Alison Lundergan Grimes 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** 

**PPOC** 

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

## MCCONNELL INSURANCE AGENCY, 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:
P. O. BOX 795 905 SYCAMORE ST.	518 South 12th st. MURRAY, KY 42071
MURRAY, KY 42071	
3. Signature of officer or chairman of the board	
John McConnell, Officer	
Signature and Title	
Type or print name and title	S SA MAR Y
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