

**Commonwealth of Kentucky**  
**Alison Lundergan Grimes, Secretary of State**

0681181  
Alison Lundergan Grimes  
KY Secretary of State  
Received and Filed  
3/1/2012 3:02:52 PM  
Fee receipt: \$10.00

L906

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**

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

**CENTRAL KENTUCKY CLAIMS SERVICE, LLC**

which is organized in the state of Kentucky, and for that purpose submits the following statements:

**1. Address of current principal office**

1260 N. DIVIDING RIDGE RD  
SADIEVILLE, KY 40370

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

170 Colston Lane  
Frankfort, KY 40601

**3. Signature of officer or chairman of the board**

Kurt Rife, Manager

Signature and Title

Type or print name and title

3/1/2012 3:02 PM

Date