

FILED EFFECTIVE

2017 SEP 15 AM 9:00

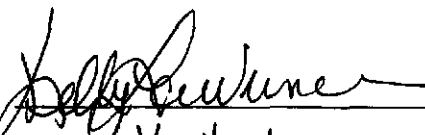
File Number: W 89569

SECRETARY OF STATE
STATE OF IDAHO
STATEMENT OF CHANGE OF BUSINESS MAILING ADDRESS
(see reverse for instructions)

The entity identified below submits to the Secretary of State the following statement for the purpose of changing its business mailing address.

1. The name of the business entity is: Kelly Adult Benefits Coordination LLC
2. The business mailing address is currently on file as:
729 W Pleasant St Idaho Falls, ID 83401
3. The business mailing address is to be changed to:
PO Box 50334 Idaho Falls, ID 83404
4. Change of address is effective:

☒ Upon Receipt OR ☐ _____
(Date)

Signed: 
Printed Name: Kelly Lawrence
Capacity: Manager
Dated: 9/12/17