e. P						0304600.09 mstratto			
State of origin KY		mmonwealth of Kentucky dergan Grimes, Secretary of S				Alison Lundergan Grimes Kentucky Secretary of State			
Alison Lundergan Gr Secretary of Stat P. O. Box 718 Frankfort, KY 40602- (502) 564-3490 http://www.sos.ky.g	e <b>Re</b> 0718 <b>R</b>	einstatement Application and Reinstatement Annual Report For the years 2010 through 2012					RST		
Exact organization nam PAUL DAVIS SY 500 W. HWY. 80 SOMERSET KY	STEMS OF CUMB			ON, INC.	name/office add form. When reins addresses until th reinstatement is f	ice address and i ress cannot be ch tating, you cannot e reinstatement is lied, the statement .sos.ky.gov/ftsea	nanged on thi modify the filed. Once th of change ca	e n be	
Registered Agent and F JO ANN EWALD 500 W. HWY. 80 SOMERSET, KY Principal Officers - List th specified, officer addresses default	) 42503 e name, address and title (	of all current of	icers. All organiz	tations must list at	least one (1) officer, eve	n in the case of a s	sole officer. If t	not	
Vice President	DON R EWALD	s. Corporations	are required to	ist a Secretary or	other officer serving as re	cords custodian		<u></u>	
President	JOANN EWALD								
Secretary	DON R EWALD								
Treasurer	JOANN EWALD								
Directors - List the name and director addresses default to the print		pplicable).No li	sting of directors	is verification that	the corporation has disp	ensed with directo	rs. If not speci	fied,	
DON R. EWA	<u>-D</u>	43	JACKS	LANE,	SOMERSET	<u>, КУ</u>	4250	1	
The above entity was admi 2010. The undersigned sta satisfies the requirements of	tes that the grounds f	for dissoluti	on either did	not exist or h	ave been eliminate	ed, and the en	tity's name	Э	
Under penalty of perjury, the information pertaining to Pareinstatement pursuant pu	AUL DAVIS SYSTEM	by authorize S OF CUM	es the Kentu BERLAND L	cky Departme AKE REGION	ent of Revenue to re I, INC. to the Secre	elease any ap etary of State,	plicable ta as require	x d for	

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.  $X = \frac{1}{P} - C_{\mu\sigma_2\pi} r_{\mu\sigma_2} r_{\mu}$ CHOZEMON Title (Required) Х June 21 2012 Date (Required) Signature of officer or chairman of the board (Required)



#### EDUCATION and WORKFORCE DEVELOPMENT CABINET OFFICE OF EMPLOYMENT AND TRAINING

Steven L. Beshear Governor Tax Enforcement Branch 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone (502) 564-2272 Fax (502) 564-5442 www.oet.ky.gov Joseph U. Meyer Secretary

William Monterosso Executive Director

Date: 07/02/2012

# PAUL DAVIS SYSTEMS OF CUMBERLAND LAKE REGION, INC.

Dear Sir/Madam:

# KRS 14A.7-030(1)(f) CERTIFICATE

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Chad Atha Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0304600





THOMAS B. MILLER Commissioner

### FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

BOB BROOKS Executive Director

July 2, 2012

#### PAUL DAVIS SYSTEMS OF CUMBERLAND LAKE REGION, INC. 500 W. HWY. 80 SOMERSET KY 42503

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **PAUL DAVIS SYSTEMS OF CUMBERLAND LAKE REGION, INC.** is exempt from filing a Kentucky Corporation Income Tax Return pursuant to KRS 141.040, KRS 141.0401 and KRS 136.070. This exemption does not apply to any other taxes administered by the Commonwealth of Kentucky. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the corporation. This letter is valid for 30 days from the date of this letter.

Any changes in the corporation's articles of incorporation, by-laws, method of reporting, name or address, or ruling by the Internal Revenue Service must be reported to this office.

Sincerely,

Lisa Saylor, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2046 FAX# 502-564-3392

Kentucky Secretary of State organization number 0304600

