| Organization ID # 052920<br>State of origin KY<br>Filing fee \$115.00 Al   |   |  | 0529200.09 amcray<br>PRPF<br>Alison Lundergan Grimes<br>Kentucky Secretary of State<br>Received and Filed:<br>11/8/2013 1:26 PM |   |
|--|---|--|---|---|
| Alison Lundergan Grime<br>Secretary of State<br>P. O. Box 718<br>Frankfort, KY 40602-071<br>(502) 564-3490<br>http://www.sos.ky.gov  | Reinstatement App   | nual Report  | Fee Receipt: \$115.00   |   |
| SELECT PEST CONTROL INC. form.<br>1020 ARBOR TECH reinst<br>SUITE L filed of file |   | name/office address of<br>form. When reinstating<br>addresses until the rein<br>reinstatement is filed, th | statement is filed. Once the<br>the statement of change can be<br><u>ky,gov/ftsearch</u> or can be                              |   |
| Registered Agent and Regi<br>MARK UNKRAUT<br>7103 TURFWAY RE<br>SUITE 300<br>FLORENCE, KY 410  | )<br>))   | unt list at logat and (1) affings and in th  |   |   |
| specified, officer addresses default to the  | me, address and title of all current officers. All organizations mu<br>principal office address. Corporations are required to list a Secr<br>RK UNKRAUT |  |   |   |
| Directors - List the name and addidirector addresses default to the principal MARK UNKRAUT   | ress of all directors (if applicable).No listing of directors is verifica<br>I office address.  | ition that the corporation has dispensed   | with directors. If not specified,   | • |
| The above entity was administ  | ratively dissolved on September 28, 2013 becau  | se the entity did not file its ar  | inual report for the year   |   |
| 2013. The undersigned states   | that the grounds for dissolution either did not ex<br>RS 271B.14-210. Enclosed is a check in the am   | ist or have been eliminated, a   | ind the entity's name   |   |

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to SELECT PEST CONTROL INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an officer of said entity, place provide a Declaration of Power of Attorney with the Reinstatement Application.

Signature of officer or chairman of the board (Required)

iera eduired)

/4 Date (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 <u>www.oet.ky.gov</u> Thomas O. Zawacki Secretary

> Buddy Hoskinson Executive Director

Date: 11/08/2013

SELECT PEST CONTROL 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 0529200





THOMAS B. MILLER Commissioner

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

ELYSE WEIGEL **Deputy Commissioner** 

**BOB BROOKS Executive Director** 

November 8, 2013

## SELECT PEST CONTROL INC. **1020 ARBOR TECH DR STE L HEBRON KY 41048**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate SELECT PEST CONTROL INC. has filed Kentucky Income Tax Returns through the tax year ended 12/31/2012, and has paid the taxes shown to be due or assessed as of the date of this letter. 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.

Sincerely,

M. L. Parker, Taxpayer Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7253 FAX# 502-564-0058

Kentucky Secretary of State organization number 0529200

