State of origin KY Filing fee \$175.00	Michael G. Adams	alth of Kentucky s, Secretary of St Michael G. Adams Kentucky Secretary of State
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0 (502) 564-3490 http://www.sos.ky.ge	718 Reinstatem Reinstatem For the yea	ent Application a rent Application a rent Annual Report rs 2019 through 2023
	nd principal office address NTERNATIONAL SALES REPRESENT 223	TATIVES The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at <u>https://</u> web.sos.ky.gov/bussearchnprofile/search or can be downloaded from our website.
Registered Agent and Reg ROBERT D. SCHU 1008 GLENBROO LOUISVILLE, KY 4 the above company is include company's information here (op FEN: Name;	ITZ K ROAD 0223 d in a parent company's Kentucky tax ret otional):	FEIN (Onfional)
Principal Officers - List the	a name, address and title of all current officer lefault to the principal office address. Corporat	rs. All organizations must list at least one (1) officer, even in the case of a sole officer tions are required to list a Secretary or other officer serving as records custodian
• • • •	ROBERT D. SCHUTZ	P.O. Box 23337, Louisville, KY 40223
Secretary S	SUSAN O. SCHUTZ	P.O. Box 23337, Louisville, KY 40223
Directors - List the name And pecified, director addresses defaul	address of all directors (if applicable).No listing	g of directors is ventication that the corporation has dispensed with directors. If Not
	P.O. Box 2333	37, Louisville, KY 40223
·····		7 Louisville KY 10223
ROBERT D. SCHUTZ SUSAN O. SCHUTZ	P.O. Box 2333	1, LOUISVING, ICT 40220

The above entity was administratively dissolved on October 16, 2019 because the entity did not file its annual report for the year 2019. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 271B.14-210. Enclosed is a check in the amount of \$175.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to THE SUMMIT CO. INTERNATIONAL SALES REPRESENTATIVES to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

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

X Signature of office Or chairman of the board (Required)	President Title (Required)	11 19 23 Date (Required)
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THE SUMMIT CO. INTERNATIONAL SALES REPRESENTATIVES P.O. BOX 23337 LOUISVILLE KY, 40223		Notice Date: KY SoS Org. ID:	November 21, 2023 0154701	
RE:	Letter of Good Standing Request - Approved			
SUMMARY	You requested a letter of good standing, and your entity is in good standing with the Department of Revenue.			
OUR DETERMINATION	 We verified the following information. You are registered with the Department of Revenue. An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing. You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place. This notice will remain current for 30 days from the notice date above. 			
WHAT YOU NEED TO DO	 If you are attempting to reinstate your entity, please provide a copy of this letter to the Kentucky Secretary of State within 30 days of the notice date above. If you are a for-profit corporation, you will also need to provide the Secretary of State a letter of good standing from the Division of Unemployment Insurance. Their telephone number is 502-564-6835. If you are a non-profit entity, please remember to file a copy of your tax returns with the Kentucky Attorney General. The charity filing requirements website is: http://ag.ky.gov/family/consumerprotection/ charity/Pages/registration.aspx. 			
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Bruce REV3968, Revenue Section Supervisor Email: Bruce.Owens@ky.gov Direct: 502-564-2038			



COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 <u>https://kewes.ky.gov</u> UITax@KY.GOV

Date: 11/21/2023

THE SUMMIT CO. INTERNATIONAL SALES REPRESENTATIVES

Dear Sir/Madam:

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

The Office 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,

Samantha Tabor Office of Unemployment Insurance PO Box 948 Frankfort, Kentucky 40602-0948 Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0154701

