Organization ID # 0484801 Commonwealth of Kentucky State of origin Filing fee \$115.00 Alison Lundergan Grimes, Secretary of

0484801.09

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Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed: 11/19/2018 1:24 PM

Fee Receipt: \$115.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Reinstatement Application and **Reinstatement Annual Report** For the year 2018

KOI

Exact organization na	me and principal office address	The principal office address and registered agent
MCGUIRE INSURANCE AGENCY, INC. 317 UNIVERSITY DR		name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the
Registered Agent and Registered Office Address		FEIN (Optional)
KENNETH K. MCGUIRE		
317 UNIVERS PRESTONSBU	JRG, KY 41653	
If the above company is in	ncluded in a parent company's Kentucky tax return as a disregard	rent
company's information he	re (optional):	
FEIN:N	lame:	
Principal Officers - Li	ist the name, address and title of all current officers. All organizations must list at lault to the principal office address. Corporations are required to list a Secretary or c	least one (1) officer, even in the case of a sole officer. If not
President	KENNETH K MCGUIRE	onion delying as records desicular
Vice President	JARRED K. MCGUIRE	
V100 1 100100110	OF WATER TO MICOGINE	
·	· · · · · · · · · · · · · · · · · · ·	
	- - 	
Directors - List the name director addresses default to the	and address of all directors (if applicable). No listing of directors is verification that	the corporation has dispensed with directors. If not specified,
'		· · · · · · · · · · · · · · · · · · ·
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The undersigned states	dministratively dissolved on October 16, 2018 because the en that the grounds for dissolution either did not exist or have be 71B.14-210. Enclosed is a check in the amount of \$115.00, pa	een eliminated, and the entity's name satisfies the
Under penalty of periur	y, the below signed hereby authorizes the Kentucky Departme	ent of Revenue to release any applicable tax
	o MCGUIRE INSURANCE AGENCY, INC. to the Secretary of	
If not an officer of said e	entity, please provide a Declaration of Power of Attorney with t	the Reinstatement Application.
7 0 -		

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Website: www.revenue.kv.gov Phone: 502-564-8139 502-564-0058 Fax:

Notice Date: November 19, 2018

KY SoS Org. ID: 0484801

317 UNIVERSITY DR PRESTONSBURG KY 41653

MCGUIRE INSURANCE AGENCY, INC.

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.

1. You are registered with the Department of Revenue.

2. An authorized person requested this letter.

- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 4. 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 1. 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.
 - 2. 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.
 - 3. 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: Christina REVE289, Revenue Auditor III

Direct: 502-564-7339



COMMONWEALTH OF KENTUCKY DIVISION OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH **EMPLOYER STATUS SECTION** 275 E MAIN ST, 2-EH FRANKFORT, KY 40621-0001 (502) 564-2272 https://kewes.ky.gov DES.UIT@KY.GOV

Date: 11/19/2018 MCGUIRE INSURANCE AGENCY, 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,

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

Kentucky Secretary of State organization number 0484801

