Organization ID # 0684602 State of origin

Commonwealth of Kentucky Filing fee \$160.00 Alison Lundergan Grimes, Secretary

0684602.09

mstratton PRPF

Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed: 11/2/2015 2:47 PM

Fee Receipt: \$160.00

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 years 2012 through 2015

**RST** 

Date (Required)

Exact organization name and principal office address

MARY K RIVES ATTORNEY AT LAW, INC. **304 WEST LIBERTY ST** SUITE 1 M **LOUISVILLE KY 40202** 

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 app.sos.ky.gov/ftsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

MARY K. RIVES 304 WEST LIBERTY ST SUITE M LOUISVILLE, KY 40202



President	MARY K. RIVES		or other officer serving as records custodian	
	# 1		W. Carrier St.	
	name and address of all directors (if applicab lit to the principal office address.	le).No listing of directors is verification t	hat the corporation has dispensed with directors. If not s	pecified,
			I I I I I I I I I I I I I I I I I I I	
		i tar i liya		
			18 1 gr. 2	
The above entity w	as administratively dissolved on Segned states that the grounds for div	eptember 11, 2012 because the	he entity did not file its annual report for the r have been eliminated, and the entity's na	e year
2012. The undersi- satisfies the requir	ements of KRS 271B.14-210, Encl	osed is a check in the amount	t of \$160.00, payable to Kentucky State Tr	easurer.
2012. The undersi satisfies the requir Under penalty of p information pertair to KRS 2718.14-2	rements of KRS 271B.14-210. Enclorer; berjury, the below signed hereby authing to MARY K RIVES ATTORNEY 20.	osed is a check in the amount thorizes the Kentucky Departr / AT LAW, INC. to the Secreta	t of \$160.00, payable to Kentucky State Tr ment of Revenue to release any applicable ary of State, as required for reinstatement p	easurer.
2012. The undersi satisfies the requir Under penalty of p information pertair to KRS 2718.14-2	ements of KRS 271B.14-210, Enclorerjury, the below signed hereby auding to MARY K RIVES ATTORNEY	osed is a check in the amount thorizes the Kentucky Departr / AT LAW, INC. to the Secreta	t of \$160.00, payable to Kentucky State Tr ment of Revenue to release any applicable ary of State, as required for reinstatement p	easurer.



THOMAS B. MILLER
Commissioner

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

**ELYSE WEIGEL**Deputy Commissioner

BOB BROOKS
Executive Director

November 2, 2015

MARY K RIVES ATTORNEY AT LAW, INC. 700 KENTUCKY HOME LIFE BUILDING 239 SOUTH 5TH STREET LOUISVILLE KY 40202

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **MARY K RIVES ATTORNEY AT LAW, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2014, 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,

Jay REVX255, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2057 FAX# 502-564-0058

Kentucky Secretary of State organization number 0684602





## **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: 11/02/2015

MARY K RIVES ATTORNEY AT LAW, 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 0684602

