Organization ID # 0714 State of origin KY Filing fee \$130.00	⁰⁰⁵ Commonwealth of K Iison Lundergan Grimes, S	-	0714005.09 Alison Lundergan Grin Kentucky Secretary of Received and Filed:	
Alison Lundergan Grir Secretary of State P. O. Box 718 Frankfort, KY 40602-0 (502) 564-3490 http://www.sos.ky.go	718 Reinstatement App For the years 2015 th	nual Report	7/28/2016 10:31 AM Fee Receipt: \$130.00	
Exact organization name LIQUOR PALACI 14619 INSPIRAT LOUISVILLE KY	ON COURT	name/office address form. When reinstati addresses until the re reinstatement is filed,	address and registered agent s cannot be changed on this ng, you cannot modify the instatement is filed. Once the the statement of change can be <u>sky.gov/fitsearch</u> or can be website.	
SUKHJIT BAINS 14619 INSPIRAT LOUISVILLE, KY		ust list at least one (1) officer, even in	the case of a sole officer. If not	
specified, officer addresses default to PresidentSecretary	the principal office address. Corporations are required to list a Secr SUKHMINDER SINGH PANDHER ASWINDER SINGH PANDHER SURMUKH SINGH PANDHER	etary or other officer serving as recor	ds custodian	
Vice President	SUKHJIT SINGH BAINS ddress of all directors (if applicable).No listing of directors is verifica	ation that the corporation has dispens	sed with directors. If not specified,	·

The above entity was administratively dissolved on September 12, 2015 because the entity did not file its annual report for the year 2015. 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 \$130.00, 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 LIQUOR PALACE 4, INC 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 AT	Sukhminder Singh Pandher, President	July <u>15</u> , 2016
Signature of officer or chairman of the board (Required)	Title (Required)	Date (Required)



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 <u>https://kewes.ky.gov</u> DES.UIT@KY.GOV

Date: 07/28/2016

LIQUOR PALACE 4, 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,

Matthew Justice Division of Unemployment Insurance 275 East Main Street, 2-EI Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0714005





DANIEL P. BORK Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

July 28, 2016

LIQUOR PALACE 4, INC 14619 INSPIRATION COURT LOUISVILLE KY 40245

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **LIQUOR PALACE 4, INC** has filed Kentucky Income Tax Returns through the tax year ended 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,

John REV3858, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2099 FAX# 502-564-3392

Kentucky Secretary of State organization number 0714005

