Organization ID # 0729005 State of origin Filing fee \$115.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State Michael G. Adams

0729005.09

tsemones PRPF

Kentucky Secretary of State Received and Filed:

11/22/2024 2:53 PM Fee Receipt: \$115.00

Michael G. Adams 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 2024

RST

Exact organization name and principal office address **BOILS REALTY, INC.** 223 SHILOH ROAD

CAMPBELLSVILLE KY 42718

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 https://web.sos.ky.goy/ bussearchnprofile/search.aspx or can be downloaded from our website.

Registered Agen	t and Registered Office Addres	s	
DONNIE		_	l l
	OH ROAD		
CAMPBE	LLSVILLE, KY 42718		j
If the above compar	ny is included in a parent company's	Kentucky tax return as a disregard	ent
company's informat			
FEIN:	Name:		
		I current officers. All organizations must list at least orporations are required to list a Secretary or other	one (1) officer, even in the case of a sole officer. If not officer serving as records custodian
President	DONNIE L BOILS		
		· ·	
			
·			
	e name And address of all directors (if applied to the principal office address.	cable).No listing of directors is verification that the	corporation has dispensed with directors. If Not specified,
DONNIE L BOIL			
	 		
		<u></u>	
			······
The undersigned :	states that the grounds for dissolu		did not file its annual report for the year 2024. eliminated, and the entity's name satisfies the le to Kentucky State Treasurer.
Under penalty of r	perium the below signed hereby:	authorizes the Kentucky Department of	f Revenue to release any applicable tax
			einstatement pursuant to KRS 271B.14-220.
· · · · · · · · · · · · · · · · · · ·	•	•	•
		laration of Power of Attorney with the	Reinstatement Application.
X Wonn	ie L Boils	President	11-18-24

Signature of officer Or chairman of the board (Required)

Title (Required)

Date (Required)

Website: www.revenue.ky.gov

BOILS REALTY, INC. 223 SHILOH ROAD **CAMPBELLSVILLE KY, 42718** Notice Date:

November 22, 2024

KY SoS Org. ID: 0729005

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.

AGENT INFORMATION If you have any questions regarding this notice, please contact me. Thank you.

Agent: James REVE277, Taxpayer Services Specialist III

Email: James.Sutherland@ky.gov

Direct: 502-564-7359



COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

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

Date: 11/22/2024		
BOILS REALTY, INC.		
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 0729005

