| Organization ID # State of origin Filing fee \$130.0 | KY U | ommonwealth of Ke ndergan Grimes, Se | - | 0273513.09 amcra PRPI | |
|---|---|--|---|--|--|
| Alison Lunderga Secretary of P. O. Box Frankfort, KY 40 (502) 564-3 http://www.sos | State 718 602-0718 3490 | cation and ual Report ough 2014 | Kentucky Secretary of State Received and Filed: 5/14/2014 2:35 PM Fee Receipt: \$130.00 | | |
| WOLF PRI 4612 SCHU | name and principa NTABLES, INC. IFF AVE E KY 40213 | l office address | 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>app.sos.ky.gov/ftsearch</u> or can be downloaded from our website. | | |
| JEFF L. WO 3004 BILOX LOUISVILLI Principal Officers - | KI CT. E, KY 40205 | title of all current officers. All organizations must l dress. Corporations are required to list a Secretar | ist at least one (1) officer, even y or other officer serving as rec | in the case of a sole officer. If not cords custodian | |
| President | JEFF WOLF | | TANK M | | |
| Vice President | BRUCE WOLF | | | | |
| | <u>1/_Nup///</u> | | | | |
| <u></u> | | | | | |
| Directors - List the name | | s (if applicable). No listing of directors is verification | n that the corporation has dispe | nsed with directors. If not specified, | |
| | | | 917 . | | |

| director addresses default to | the principal office address. | | |
|---------------------------------------|-------------------------------|----------|--|
| JEFF WOLF | | | |
| BRUCE WOLF | | | |
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| <u></u> | A A TREESERY AN A REAL | 2 . S. S | |

The above entity was administratively dissolved on September 28, 2013 because the entity did not file its annual report for the year 2013. 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 WOLF PRINTABLES, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

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

Ĺ chairman of the board (Required) Signature

Title (Required)

lm

Date (Required)



THOMAS B. MILLER Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

BOB BROOKS Executive Director

May 14, 2014

WOLF PRINTABLES, INC. 4612 SCHUFF AVE LOUISVILLE KY 40213

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **WOLF PRINTABLES**, **INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2012, 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,

Matthew McLaughlin, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2169 FAX# 502-564-3392

Kentucky Secretary of State organization number 0273513





EDUCATION and WORKFORCE DEVELOPMENT CABINET OFFICE OF EMPLOYMENT AND TRAINING

Steven L. Beshear Governor Tax Enforcement Branch 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone (502) 564-2272 Fax (502) 564-5442 <u>www.oet.ky.gov</u> Thomas O. Zawacki Secretary

> Buddy Hoskinson Executive Director

Date: 05/14/2014

WOLF PRINTABLES, 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,

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

Kentucky Secretary of State organization number 0273513

