## Organization ID # 0491014 Commonwealth of Kentucky State of origin KY Filing fee \$115.00 Alison Lundergan Grimes, Secretary of S

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Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 11/28/2017 1:05 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 2017

**RST** 

Exact organization name and principal office address

J.R. LAWSON'S RESTAURANTS OF SPRINGFIELD, INC.
1109 LINCOLN DR
SPRINGFIELD KY 40069

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 <a href="mailto:app.sos.ky.gov/ftsearch">app.sos.ky.gov/ftsearch</a> or can be downloaded from our website.

Registered Agent	and Registered Office Address		
	L LAWSON		
	COLN DR		
SPRING	FIELD, KY 40069		
	ny is included in a parent company's Ker	tucky tax return as a disregard	t
company's informati			
FEIN:	Name:		
		ent officers. All organizations must list at least one (1) officer, ev ations are required to list a Secretary or other officer serving as	
President	RANDALL LAWSON		
Secretary	CONNIE LAWSON		
	name and address of all directors (if applicable all to the principal office address.	).No listing of directors is verification that the corporation has dis	spensed with directors. If not specified,
RANDALL LAWS	SON		
CONNIE LAWSO	ON		
The undersigned s	states that the grounds for dissolution	tober 9, 2017 because the entity did not file its an either did not exist or have been eliminated, and in the amount of \$115.00, payable to Kentuck	nd the entity's name satisfies the
Under penalty of p	eriury, the below signed hereby auth	norizes the Kentucky Department of Revenue to	release any applicable tax
information pertair		NTS OF SPRINGFIELD, INC. to the Secretary of	
f not an officer of	said entity, please provide a Declara	tion of Power of Attorney with the Reinstatemen	nt Application.
Y /	La contraction of the contractio	Senters	20.12
Signature of office	er or chairman of the board (Required)	Tile (Required)	Date (Required)
orginature or office	or or orialization or the board (ixequired)	(Nedanea)	Sale (Hedanea)



DANIEL P. BORK
Commissioner

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

November 27, 2017

#### J.R. LAWSON'S RESTAURANTS OF SPRINGFIELD, INC. 1109 LINCOLN DR SPRINGFIELD KY 40069

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **J.R. LAWSON'S RESTAURANTS OF SPRINGFIELD, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2016, 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,

Ramon REV4636, Taxpayer Services Specialist I Pass Through Entity Branch 501 High Street, Mail Station 52 Frankfort, KY 40601 Phone# (502) 564-2169 Fax# (502) 564-0058

Kentucky Secretary of State organization number 0491014





#### 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: 11/27/2017

J.R. LAWSON'S RESTAURANTS OF SPRINGFIELD, 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,

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

Kentucky Secretary of State organization number 0491014

