Organization ID # 0039915 State of origin KY Filing fee \$295.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0039915.09

balimonos **PRPF**

Michael G. Adams **Kentucky Secretary of State**

Received and Filed: 5/11/2020 2:42 PM Fee Receipt: \$295.00

RST

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Reinstatement Annual Report For the years 2008 through 2020

Reinstatement Application and

Exact organization name and principal office address PAINTSVILLE D. Q. CORPORATION 906 BROADWAY PAINTSVILLE KY 412401347

Signature of officer Or chairman of the board (Required)

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		_	FEIN (Ontional)
GEORGE B. HILL			
906 BROAD	·WAY		
	E, KY 412401347		
		entucky tax return as a disregarded	
company's information FEIN:			
FEIN	Name		
Principal Officers	- List the name, address and title of all or	urrent officers. All organizations must list at le	ast one (1) officer, even in the case of a sole officer. If not
specified, officer addresses	default to the principal office address. Corp	porations are required to list a Secretary or other	ner officer serving as records custodian
Vice President	TEDDY DELONG JR		
Treasurer	CRAIG DELONG		
Secretary	TIM DELONG		
President	CRAIG DELONG		
2008. The undersign	ed states that the grounds for di	issolution either did not exist or ha	tity did not file its annual report for the year we been eliminated, and the entity's name \$295.00, payable to Kentucky State Treasurer.
information pertainin 271B.14-220.	g to PAINTSVILLE D. Q. CORP	ORATION to the Secretary of Stat	nt of Revenue to release any applicable tax te, as required for reinstatement pursuant to KRS
If not an officer of sa	id entity, please ppovide a Decla	aration of Power of Attorney with th	ne Reinstatement Application.
x (ciai	aleh	PRESIDENT	3/31/20
Signature of officer (Or chairman of the board (Required)	Title (Required)	Date (Required)

Title (Required)

Website: www.revenue.ky.gov Phone: 502-564-8139

May 11, 2020

0039915

502-564-0058 Fax:

Notice Date:

KY SoS Org. ID:

PAINTSVILLE D. Q. CORPORATION 906 BROADWAY PAINTSVILLE KY 412401347

Letter of Good Standing Request - Approved

SUMMARY

RE:

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.

CONTACT INFORMATION

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

Agent: Bruce REV3968, Taxpayer Services Specialist II

Email: Bruce.Owens@ky.gov

Direct: 502-564-2038



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: 05/08/2020

PAINTSVILLE D. Q. CORPORATION

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,

Richard Lemay
Office of Unemployment Insurance
PO Box 948
Frankfort, Kentucky 40602-0948
Phono: (502) 564, 2272

Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0039915

