Organization ID # 0579816 State of origin

Alison Lundergan Grimes

Secretary of State

P. O. Box 718

Frankfort, KY 40602-0718

(502) 564-3490 http://www.sos.ky.gov

Commonwealth of Kentucky Filing fee \$220.00 Alison Lundergan Grimes, Secretary of Sta

0579816.09

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Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 6/20/2018 11:14 AM Fee Receipt: \$220.00

Reinstatement Application and Reinstatement Annual Report For the years 2011 through 2018

RST

Exact organization name and principal office address **3 C'S FARRIER SERVICE, INC. 290 LUKE ROAD**

Signature of officer or chairman of the board (Required)

SADIEVILLE KY 40370

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		EEIN (Optional)
BRANDO	N COATS	
290 LUKI	E ROAD	
SADIEVII	LLE, KY 40370	
	ny is included in a parent company's Kentucky tax retu	m as a disregarded
company's informati		
FEIN:	Name:	
		organizations must list at least one (1) officer, even in the case of a sole officer. If not ed to list a Secretary or other officer serving as records custodian
President	BRANDON COATS	
Secretary	DEVIN MICHELLE COATS	
	name and address of all directors (if applicable). No listing of directors to the principal office address.	ectors is verification that the corporation has dispensed with directors. If not specified,
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2011. The undersi	gned states that the grounds for dissolution either	2011 because the entity did not file its annual report for the year er did not exist or have been eliminated, and the entity's name ck in the amount of \$220.00, payable to Kentucky State Treasurer.
		centucky Department of Revenue to release any applicable tax ceretary of State, as required for reinstatement pursuant to KRS
If not an officer of	said entity, please provide a Declaration of Powe	er of Attorney with the Reinstatement Application.
v Z 1		1 1

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

June 20, 2018

0579816

502-564-0058 Fax:

Notice Date:

KY SoS Org. ID:

3 C'S FARRIER SERVICE, INC. 100 GRAYSON WAY **GEORGETOWN, KY. 40324**

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: Cory REV4079, Revenue Auditor I

Email: Cory.Johnson@ky.gov Direct: (502) 564-7370



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: 06/20/2018
3 C'S FARRIER SERVICE, 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 0579816

