Organization ID	# 0298117			0298117.09 amcray	
State of origin	KY		Commonwealth of Kentucky		
Filing fee \$115.00 Alison Lundergan Grimes, Secretary of S				Alison Lundergan Grimes	
				Kentucky Secretary of State	
				Received and Filed: 11/18/2016 10:37 AM	
Alison Lunde		Poinstatomor	t Application and	Fee Receipt: \$115.00	
Secretary P. O. B			• •		
Frankfort, KY		Reinstateme	nt Annual Report		
(502) 56		For th	e year 2016		
http://www.	sos.ky.gov				
	······		The principal of	ffice address and registered agent	
LACE Organization name and principal onice address name/office a				dress cannot be changed on this	
				nstating, you cannot modify the the reinstatement is filed. Once the	
HARLAN KY 40831				; filed, the statement of change can be pp.sos.ky.gov/ftsearch or can be	
				n our website.	
2311 W. HARLAN	T BURNS HWY. 72 N, KY 40831 rs - List the name, add	ress and title of all current officers. All org	anizations must list at least one (1) officer, ev	ven in the case of a sole officer. If not	
<u> </u>			to list a Secretary or other officer serving as	records custodian	
<u>Secretary</u>	KATHY E				
President Treasurer	ROBERT	BURNS SR			
			in in a a second se	······································	
	name and address of a		tors is verification that the corporation has di	spensed with directors. If not specified,	
KATHY BURNS					
ROBERT BURN	SSR				
KATHY BURNS					
The above entity v	vas administrativel	v dissolved on October 1, 2016	because the entity did not file its a	annual report for the year 2016.	
The undersigned s	states that the grou	nds for dissolution either did no	t exist or have been eliminated, a	nd the entity's name satisfies the	
requirements of K	R3 21 10.14-210. t	Inclosed is a check in the amou	int of \$115.00, payable to Kentuck	y State Treasurer.	

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to R & K INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

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

D <u>X</u> e S Title (Required) signature of officer or chairman of the board (Required) Date (Required



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 <u>https://kewes.ky.gov</u> DES.UIT@KY.GOV

Date: 11/18/2016

R & K 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,

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

Kentucky Secretary of State organization number 0298117





DANIEL P. BORK Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

November 18, 2016

R & K INC. 2311 W HWY 72 HARLAN KY 40831

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **R & K INC.** has filed Kentucky Income Tax Returns through the tax year ended 2015, 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,

James REVE277, Taxpayer Services Specialist II Pass Through Entity Branch 501 High Street, Mail Station 69 Frankfort, KY 40601 Phone: (502) 564-7359 Fax: (502) 564-3392

Kentucky Secretary of State organization number 0298117

