Organization ID # 03 State of origin KY Filing fee \$190.00		-			
Alison Lundergan G Secretary of Sta P. O. Box 718 Frankfort, KY 40602 (502) 564-3490 http://www.sos.ky.	Reinstatement Reinstatement For the years 20	Application and Annual Report 009 through 2014	Received and Filed: 1/15/2014 1:06 PM Fee Receipt: \$190.00		
		name/office addres: form. When reinstati addresses until the re reinstatement is filed filed online at <u>app so</u>	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 downbaded from our website		
LONNIE PYLES ROUTE 4, BOX ALBANY, KY 42 Principal Officers - List	. 370 1602 he <b>name, address and title</b> of all current officers. All organiz	rations must list at least one (1) officer, even in	the case of a sole officer. If not		
specified, officer addresses defaul Vice President	to the principal office address. Corporations are required to I RONNIE PYLES	ist a Secretary or other officer serving as reco	rds custodian		
President Secretary Treasurer	LONNIE PYLES				
Directors - List the name an director addresses default to the p	d address of all directors (if applicable).No listing of directors	is ventication that the corporation has dispens	ed with directors. If not specified,		
LONNIE PYLES					
RONNIE PYLES					
<u>مر بر من معلم معلم معلم معلم معلم معلم معلم م</u>					

The above entity was administratively dissolved on November 3, 2009 because the entity did not file its annual report for the year 2009. 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 \$190.00, 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 PYLES LUMBER COMPANY, 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.

X Lonnie Pyles	PRES	1/10/14
Signature of officer or chairman of the doard (Required)	Title (Required)	Date (Required)



## 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: 01/15/2014

PYLES LUMBER COMPANY, 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 0330118





THOMAS B. MILLER Commissioner

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

ELYSE WEIGEL **Deputy Commissioner** 

**BOB BROOKS Executive Director** 

January 15, 2014

## PYLES LUMBER COMPANY, INC. **4161 BURKESVILLE ROAD ALBANY KY 42602**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate PYLES LUMBER COMPANY, INC. has filed Kentucky Income Tax Returns through the tax year ended 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,

James Sutherland, 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 0330118

