| Organization ID # 0116019 Commonwealth of Kentucky State of origin KY Filing fee \$115.00 Alison Lundergan Grimes, Secretary of St | | | | | 9.09 dergan Grin Secretary of and Filed: | mstratton PRPF nes State |
|--|---|--|--|---|--|-----------------------------------|
| 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 2013 | | 10/16/2013 3:15 PM Fee Receipt: \$115.00 | | |
| | | | | | | |
| Exact organization n PHOTOGRAF 2502-A PLAN LOUISVILLE | PHIC TECHN | - | The principal off name/office add form. When reins addresses until th reinstatement is fi filed online at <u>app</u> downloaded from | ess cannot be ch tating, you cannot e reinstatement is led, the statement .sos.ky.gov/ftsea | hanged on this t modify the s filed. Once the t of change can b | |
| | L ITSIDE DRIV KY 40299 ist the name, addre | E ss and title of all current officers. All organizations mu | | | sole officer. If no | |
| Vice President | TANYA T | office address. Corporations are required to list a Secre | stary or other officer serving as re | cords custodian | | |
| President | | ······································ | ······································ | - <u></u> | | |
| Directors - List the name director addresses default to the | | directors (if applicable).No listing of directors is verifica dress. | tion that the corporation has disp | ensed with directo | ors. If not specifie | .d, |
| 2013. The undersigned | states that the | dissolved on September 28, 2013 becau grounds for dissolution either did not exi B.14-210. Enclosed is a check in the am | st or have been eliminate | ed, and the e | ntity's name | |
| Under penalty of perjury | y, the below sig | gned hereby authorizes the Kentucky Dep PHIC TECHNIQUES, INC. to the Secreta | partment of Revenue to r | elease any a | pplicable tax | |
| If not an officer of said | entity, please p | provide a Declaration of Power of Attorney | with the Reinstatement | Application. | | |

| X Danyo-A. Juell | Vice President | 10-15-13 |
|--|------------------|-----------------|
| Signature of officer or chairman of the board (Required) | Title (Required) | Date (Required) |

Check# 11205 \$11509

10-15-13 January. Juel U Cell: 502-396-0660



THOMAS B. MILLER Commissioner

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

ELYSE WEIGEL **Deputy Commissioner**

BOB BROOKS Executive Director

October 16, 2013

PHOTOGRAPHIC TECHNIQUES, INC. **2502-A PLANTSIDE DRIVE LOUISVILLE KY 40202**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate PHOTOGRAPHIC TECHNIQUES, INC. has filed Kentucky Income Tax Returns through the tax year ended 12/31/2012, 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,

Matthew McLaughlin, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2169 FAX# 502-564-3392

Kentucky Secretary of State organization number 0116019







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: 10/16/2013

PHOTOGRAPHIC TECHNIQUES, 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 0116019

