Organization ID # 0308719 Commonwealth of Kentucky State of origin KY Filing fee \$115.00 Alison Lundergan Grimes, Secretary of Sta					0308719.09 amcray PRPF Alison Lundergan Grimes Kentucky Secretary of State Received and Filed:	
Secretary o P. O. Box Frankfort, KY 4 (502) 564	Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov				9/29/2015 11:08 AM Fee Receipt: \$115.00	00
Exact organization name and principal office address FOX TROT CORPORATION 6000 SULPHUR WELL ROAD LEXINGTON KY 40509				name/office addre form. When reinst addresses until the reinstatement is fil	ce address and registered agent ess cannot be changed on this lating, you cannot modify the e reinstatement is filed. Once the ed, the statement of change can be <u>sos.ky.gov/ftsearch</u> or can be bur website.	
6000 SULI	and Registered YN D. YATES PHUR WELL RC DN, KY 40509					
Principal Officers specified, officer addresses	- List the name, address default to the principal	ss and title of all current of office address. Corporation	officers. All organizations mu	st list at least one (1) officer, even stary or other officer serving as rec	in the case of a sole officer. If not cords custodian	
President	JACQUEL	YN D. YATES				
<u> </u>						
		<u> </u>				
					······································	
Directors - List the na director addresses default t			listing of directors is verifica	tion that the corporation has dispe	ensed with directors. If not specified,	
		· · ·		: 		
				hills to a		
		·		200 m. 1 \$ de		

The above entity was administratively dissolved on September 12, 2015 because the entity did not file its annual report for the year 2015. 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 \$115.00, 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 FOX TROT CORPORATION to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

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

President n N Ĺ later ature of officer or chairman of the board (Regulired) Title (Required)

91 Required



THOMAS B. MILLER Commissioner

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

ELYSE WEIGEL **Deputy Commissioner**

BOB BROOKS Executive Director

September 28, 2015

FOX TROT CORPORATION 6000 SULPHUR WELL ROAD **LEXINGTON KY 40509**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate FOX TROT CORPORATION has filed Kentucky Income Tax Returns through the tax year ended 12/31/2014, 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,

Nicole REVX129, Taxpayer Services Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2062 FAX# 502-564-0058

Kentucky Secretary of State organization number 0308719





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: 09/28/2015

FOX TROT CORPORATION

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,

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

Kentucky Secretary of State organization number 0308719

