	•		
			0577619.09 dcornish
Organization ID # 0577619	Commonwea	Ith of Kentucky	PRPF
State of origin KY Filing fee \$115.00 Alison L		P 1	Alison Lundergan Grimes Kentucky Secretary of State
Filing ree \$115.00 AIISON L	unuergan Gr	illes, Secietary of	Received and Filed:
	······		11/1/2018 8:40 AM
Alison Lundergan Grimes			Fee Receipt: \$115.00
Secretary of State	Reinstateme	ent Application and	
P. O. Box 718			
Frankfort, KY 40602-0718		ent Annual Report	
(502) 564-3490	For	the year 2018	2
http://www.sos.ky.gov			
Exact organization name and principa	al office address		office address and registered agent address cannot be changed on this
	IPING, INC.	form. When r	einstating, you cannot modify the
101 MUIR FIELD DRIVE NICHOLASVILLE KY 40356			til the reinstatement is filed. Once the is filed, the statement of change can be
		filed online at	app.sos.ky.gov/ftsearch or can be om our website.
			om our website.
Registered Agent and Registered Office	<u>ce Address</u>		
101 MUIR FIELD DR.			
NICHOLASVILLE, KY 40356			
If the above company is included in a parent company's information here (optional):	company's Kentucky tax re	urn as a disregarde	
FEIN: Name:			
Principal Officers - List the name, address specified, officer addresses default to the principal offi	and title of all current officers. All	organizations must list at least one (1) officer,	even in the case of a sole officer. If not
President MICHAEL P			
Secretary FRANKLIN [D. SMITH		
Vice President KEVIN DAN	IEL BYERS		
	1	a contraction of the second seco	
Directors - List the name and address of all dire director addresses default to the principal office addres	ectors (if applicable).No listing of d	rectors is verification that the corporation has a	dispensed with directors. If not specified,
MICHAEL BYERS			
KEVIN BYERS			
FRANKLIN SMITH			
	1		

l

The above entity was administratively dissolved on October 16, 2018 because the entity did not file its annual report for the year 2018. 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 PRIME TIME CONCRETE PUMPING, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 2718.14-220. to KRS 271B.14-220. If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

<u>X</u> /	MILLA SC		Pres.	10-28-18
<u> </u>	Signature of officer of chairman of the or	pard (Required)	Title (Required	10 - 28 - 10 Date (Required)



PRIME TIME CONCRETE PUMPING, INC. 101 MUIR FIELD DRIVE NICHOLASVILLE KY 40356

 Notice Date:
 October 31, 2018

 KY SoS Org. ID:
 0577619

RE:	Letter of Good Standing Request - Approved			
SUMMARY	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.			
	 You are registered with the Department of Revenue. An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing. 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	 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. 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. 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: Stephanie REVX219, Taxpayer Services Specialist II Email: Stephanie.Brown@ky.gov Direct: 502-564-2028			



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: 10/31/2018

PRIME TIME CONCRETE PUMPING, 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,

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 0577619

