organization ID# 0452423

Commonwealth of Kentucky State of origin KY
Filing fee \$175.00 Alison Lundergan Grimes, Secretary of Sta

0452423.09

Alison Lundergan Grimes

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490

Reinstatement Application and Reinstatement Annual Report For the years 2010 through 2014

Kentucky Secretary of State Received and Filed: 2/24/2014 11:44 AM Fee Receipt: \$175.00

| Evact | organization | name and | principal | office a | ddraee |
|-------|---------------|----------|-----------|----------|--------|
| CXAUL | VIgatiization | name anu | principal | Unite a | uuless |

FARMERS S & T, INC. P.O. BOX 936 MAIN STREET **HYDEN KY 41749**

http://www.sos.ky.gov

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 downloaded from our website.

| Registered Agent and CHRIS ADAMS | | ddress | | | | | |
|--|--|--|--|--|--|--|--|
| P.O. BOX 936 | A STATE OF THE STA | | | | | | |
| MAIN STREET | <i></i> | | · ¥ | | | | |
| HYDEN, KY 41 | 749 | | | | | | |
| · | | | | | | | |
| Principal Officers - List specified, officer addresses defau | the name, address and title o | all current officers. All organizations must list Corporations are required to list a Secretary | at least one (1) officet, even in the or other officer serving as records | case of a sole officer, if not custodian | | | |
| President | CHRIS ADAMS | | #/ " \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | | |
| Vice President | WILLARD ADAMS | | Al Property Like | | | | |
| | II TO THE | | */ | | | | |
| | d as II | | | | | | |
| D14 | | | | | | | |
| DIFECTORS - List the name and director addresses default to the p | d address of all directors (if ap | plicable).No listing of directors is verification t | hat the corporation has dispensed | with directors. If not specified, | | | |
| A Cost Lour | Illicapai Orice address. | Willard Adams | | | | | |
| PIEMIGENT | | WI MI OF THE SUPPLY | F/ And T | | | | |
| | | | # 1 / Y / A | | | | |
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| | | | #/43/14=5 /# | | | | |
| The above entity was administratively dissolved on November 2, 2010 because the entity did not file its annual report for the year | | | | | | | |
| 2010. The undersigned states that the grounds for dissolution either did not exist of have been eliminated, and the entity's name | | | | | | | |
| satisfies the requirements of KRS 271B 14-210 Enclosed is a check in the amount of \$175.00 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 I | FARMERS S & T, INC | to the Secretary of State, as requir | ed for reinstatement purs | uant 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 Willand | Cédons | Dresi den | t | 2-10-14 | | | |
| Signature of officer or chair | man of the board (Required) | Title (Requir | red) | 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 www.oet.ky.gov Thomas O. Zawacki Secretary

Buddy Hoskinson Executive Director

| Date: 02/24/2014 | |
|---------------------|--|
| FARMERS S & T, 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 0452423





THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

February 24, 2014

FARMERS S & T, INC. P.O. BOX 936 MAIN STREET HYDEN KY 41749

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **FARMERS S & T, 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,

Janice Sexton, Taxpayer Services Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7310 FAX# 502-564-0058

Kentucky Secretary of State organization number 0452423

