Organization ID # 0200325 State of origin

Commonwealth of Kentucky Filing fee \$130.00 Alison Lundergan Grimes, Secretary of Sta

0200325.09

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Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed: 4/22/2013 2:31 PM Fee Receipt: \$130.00

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 years 2012 through 2013

Exact organization name and principal office address BRINEY PLUMBING COMPANY, INC. 944 FIDDLER LN **TAYLORSVILLE KY 40071**

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 Registered Office Address | | | |
|--|---|---|--|--|
| TERRY W 944 FIDDI | BRINEY N | | | |
| Principal Officers specified, officer addresses | = List the name, address and title of all currents default to the principal office address. Corporati | t officers. All organizations mus ons are required to list a Secre | at list at least one (1) officer, even in the stary or other officer serving as records o | case of a sole officer. If not custodian |
| Sole Officer | TERRY W BRINEY | | | |
| | | | | |
| | | | A. Company | |
| | | | | |
| Directors - List the nadirector addresses default | ame and address of all directors (if applicable). Note the principal office address. | lo listing of directors is verifical | tion that the corporation has dispensed | with directors. If not specified, |
| | | | | |
| | A Section and Control of Control | | A Assessment | |
| | | 7.75.7 1.19 | | |
| | | | #/ <u>#</u> | |
| | | | */ | |
| | | | | |
| 2012. The undersign | is administratively dissolved on Septined states that the grounds for dissoments of KRS 2718.14-210. Enclose | lution either did not exi | st or have been eliminated, ar | nd the entity's name |
| information pertainin KRS 271B.14-220. | rjury, the below signed hereby authong to BRINEY PLUMBING COMPAN | Y, INC, to the Secretar | y of State, as required for rein | statement pursuant to |
| If not an officer of sa | aid entity, please provide a Declaration | on of Power of Attorney | with the Reinstatement Appli | ication. |
| X Signature of Afficer | or chairman of the board (Required) | Sole Offic | Required) | 4-/3-/3 Date (Required) |



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKSExecutive Director

April 22, 2013

BRINEY PLUMBING COMPANY, INC. 944 FIDDLER LN TAYLORSVILLE KY 40071

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **BRINEY PLUMBING COMPANY, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2011, 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,

Mark Kuyper, Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2118 FAX# 502-564-0058

Kentucky Secretary of State organization number 0200325





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 Joseph U. Meyer Secretary

William Monterosso
Executive Director

Date: 04/22/2013

BRINEY PLUMBING 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 0200325

