

#130.00

Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Reinstatement Annual Report
For the years 2014 through 2015

0540925.09

mstratton
PRPF

Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
10/23/2015 7:54 AM
Fee Receipt: \$130.00

Exact organization name and principal office address

TTL INC.
THE GODDARD SCHOOL
2613 LEGENDS WAY
CRESTVIEW HILLS KY 41017

The principal office address and name/officer 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 sos.ky.gov/research or can be downloaded from our website.

Registered Agent and Registered Office Address

ADENIKE AINA
2613 LEGENDS WAY
CRESTVIEW HILLS, KY 41017

FEIN (Optional)

52-0790465

Principal Officers - List the name, address 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 specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian.

Sole Officer _____ ADENIKE AINA _____

Directors - List the name and address of all directors (if applicable). No listing of directors is verification that the corporation addresses default to the principal office address.

ADENIKE AINA _____

The above entity was administratively dissolved on September 30, 2014 because the entity did not file its annual report for the year 2014. 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 \$130.00, 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 TTL INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

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


Signature

President
Title

Date
8/25/15

\$130.00



**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
<https://kewes.ky.gov>
DES.UIT@KY.GOV

Date: 10/22/2015

TTL 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 0540925



THOMAS B. MILLER
Commissioner

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

ELYSE WEIGEL
Deputy Commissioner

BOB BROOKS
Executive Director

October 22, 2015

**TTL INC.
2180 SAXON WAY
ALLEN TX 75013**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **TTL INC.** 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,

Jay REVX255, Revenue Auditor I
Division of Corporation Tax
501 High Street, Mail Sta. 52
Frankfort, KY 40601
502-564-2057
FAX# 502-564-0058

Kentucky Secretary of State organization number 0540925