Organization ID # 0471026 State of origin KY Filing fee \$370.00 Alison	Commonwealth of Kein Lundergan Grimes, Sec	Alison Lunc	Iergan Grimes ecretary of State
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		
Exact organization name and princ COLDIRON TRUCKING, IN P.O. BOX 66 HIGHWAY 421 BLEDSOE KY 40810 Registered Agent and Registered (DION COLDIRON P.O. BOX 66 HIGHWAY 421 BLEDSOE, KY 40810 If the above company is included in a par	С.	The principal office address and name/office address cannot be o form. When reinstating, you canno addresses until the reinstatement i reinstatement is filed, the statemer filed online at <u>app.sos.ky.gov/ftse</u> downloaded from our website.	changed on this ot modify the is filed. Once the nt of change can be
company's information here (optional): FEIN:Name: Principal Officers - List the name, addr specified, officer addresses default to the principa President Vice-President Secretary Treasurer Lion	I directors (if applicable).No listing of directors is verification	t at least one (1) officer, even in the case of a or other officer serving as records custodian <u>vinston Circle H_ Rich mon</u> that the corporation has dispensed with direct	<u>, Ky. 40475</u>

The above entity was administratively dissolved on November 1, 2000 because the entity did not file its annual report for the year 2000. 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 \$370.00, 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 COLDIRON TRUCKING, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

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

resident 9-15-2018 in σ N ignature of officer or chairman of the board (Required) Date (Required) eauired



COLDIRON TRUCKING, INC. 304 REMMINGTON CIRCLE #1 RICHMOND, KY 40475

Notice Date: October 15, 2018 KY SoS Org. ID: 0471026

RE:	<i>Letter of Good Standing Request - Approved</i> You requested a letter of good standing, and your entity is in good standing with the Department of Revenue.		
SUMMARY			
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: Bruce REV3968, Taxpayer Services Specialist I Email: Bruce.Owens@ky.gov Direct: 502-564-2038		



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: 10/15/2018

COLDIRON TRUCKING, 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 0471026

