Organization ID# 0473628 State of origin

> (502) 564-3490 http://www.sos.ky.gov

**Commonwealth of Kentucky** Filing fee \$265.00 Alison Lundergan Grimes, Secretary of St

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Kentucky Secretary of State Received and Filed: 7/23/2015 2:38 PM

Fee Receipt: \$265.00

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PRPF Alison Lundergan Grimes

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718

Reinstatement Application and **Reinstatement Annual Report** For the years 2005 through 2015

KOI

Exact organization name and principal office address

LARRY R. KNIPP, INC. **723 WEST MAIN STREET MOREHEAD KY 40351** 

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 a	and Registered Office Address			
LARRY R.		game .		
	MAIN STREET			
MOREHEA	D, KY 40351			
Principal Officers -	List the name, address and title of all curre	nt officers. All organizations must l	ist at least one (1) officer, even in the case	of a sole officer. If not
specified, officer addresses of	default to the principal office address. Corpora	tions are required to list a Secreta	ry or other officer serving as records custo	dian
Sole Officer	LARRY R KNIPP			
		<u> </u>		
Directors - List the nam	ne and address of all directors (if applicable).	No listing of directors is verificatio	n that the corporation has dispensed with	directors, If not specified,
director addresses default to	the principal office address.	<del></del>		
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			<del></del>	
			N 1/03 //	
	administratively dissolved on Noved administratively dissolved on Noved states that the grounds for dissolved in the control of the control o			
	ents of KRS 271B.14-210. Enclos			
·	ury, the below signed hereby author	Value of the second	ol ( 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•
information pertaining	to LARRY R. KNIPP, INC. to the	Secretary of State, as rec	uired for reinstatement pursuar	it to KRS
271B.14-220.				
If not an officer of said	d entity, please provide a Declarat	ion of Power of Attorney	with the Reinstatement Applicati	on.
Y J	h Kun		- <del></del>	7/21 7015
Signature of officer or	chairman of the board (Required)	Preside (Re	guired)	Date (Required)
	,,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		. = ( 1)



THOMAS B. MILLER
Commissioner

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

**ELYSE WEIGEL**Deputy Commissioner

**BOB BROOKS**Executive Director

July 23, 2015

LARRY R. KNIPP, INC. 723 WEST MAIN STREET MOREHEAD KY 40351

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **LARRY R. KNIPP, 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,

Michael REVY105, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7316 FAX# 502-564-0058

Kentucky Secretary of State organization number 0473628





## 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: 07/23/2015
LARRY R. KNIPP, 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 0473628

