Organization ID # State of origin	0722530 KY	Commonwealth of Kentucky	
Filing fee	\$115.00	Elaine N. Walker, Secretary of State	Ela

I CALLER A LE CAMER A LE RESELLE D'ARA bschell 2530.09 PRPF

ine N. Walker, Secretary of State Received and Filed: 10/18/2011 12:12 PM Fee Receipt: \$115.00

RST

Elaine N. Walker 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 year 2011

Exact organization name and principal office address SAMAAN, INC. 8061 HARRODSBURG RD. NICHOLASVILLE KY 40356

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/fisearch or can be downloaded from our website.

Registered Agent and Registered Office Address

ALA A CAMAAN

ALA SAMAAN 8061 HARRODSBURG RD. NICHOLASVILLE, KY 40356

Draaidant



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

Directors - List the name and address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors. If not spe						

ecified director addresses default to the principal office address.

The above entity was administratively dissolved on September 10, 2011 because the entity did not file its annual report for the year 2011. 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 27/B.14-210. Enclosed is a check in the amount of \$115.00, payable to Kentucky State Treasurer.

Under penalty of period, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining/to SAMAAN/ INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an offic f said entity, blockse provide a Declaration of Power of Attorney with the Reinstatement Application.

or chairman of the board (Required 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 <u>www.oet.ky.gov</u> Joseph U. Meyer Secretary

William Monterosso Executive Director

Date: 10/18/2011

SAMAAN, 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 0722530





THOMAS B. MILLER Commissioner

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

ELYSE WEIGEL **Deputy Commissioner**

BOB BROOKS Executive Director

October 18, 2011

SAMAAN, INC. 8061 HARRODSBURG RD. NICHOLASVILLE KY 40356

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate SAMAAN, INC. has filed Kentucky Income Tax Returns through the tax year ended 12/31/2010, 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,

Lisa Saylor, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2046 FAX# 502-564-3392

Kentucky Secretary of State organization number 0722530

