Organization ID # State of origin Filing fee	0728733 КҮ \$115.00		Commonwealth of Kentucky Trey Grayson, Secretary of State			T R 1			bschell PRPF ry of State	
Trey Grayson 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 2010					I		RST	
Exact organization SCOOTMO 10511 NAL UTICA KY	DDS, INC. LEY ROAD	principa	l office address	<u>3</u>		name/office a form. When r addresses un	address ca einstating, til the reins t is filed, the app.sos.k	nnot be ch you cannot tatement is e statement y.gov/ftsea	filed. Once the of change can be	 I
100 ST. AN	E. MOUNTJO IN BUILDING DRO, KY 423	DY 03		ers. All organizations	must list at least	one (1) officer,	even in the	e case of a s	sole officer.	
President		thon	Bigger	1051	Nalley	Rd.	Uticn	Ky	42376	
<u>Vice-President</u> Secretary Treasurer	Jose	ph (Bryan	1255	Lindin	Are O	winst	10,0	Ку 4230	/
Directors - List the na	me and address o	f all director	s (if applicable).No listir	ng of directors is ver	ification that the c	corporation has	dispensed	with directo	rs.	
The above entity was 2010. The undersign satisfies the requiren Under penalty of per information pertainin If not an officer of sa	ed states that nents of KRS 2 jury, the below g to SCOOTM	the groui 271B.14-2 signed h ODS, IN(nds for dissolution 210. Enclosed is nereby authorizes C. to the Secretar	n either did not a check in the the Kentucky y of State, as r	exist or have amount of \$1 Department of equired for re	been elimii 15.00, paya of Revenue einstatemen	nated, a able to K to releas t pursua	nd the er entucky se any ap nt to KR	ntity's name State Treasure oplicable tax	

inotar	Tomber of salu entry, please provide a De	ciaration of Fower of Attorney with the Reinstatem
Y	11,	Secre rary

Signature of officer or chairman of the board (Required) Δ

1

Jeaner લ / Title (Required)

11-24-10 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: 11/30/2010

SCOOTMODS, INC.

Dear Sir/Madam:

KRS 271B.14-220(1)(e) CERTIFICATE

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 271B.14-220(1)(e).

Sincerely,

John Coleman Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0728733





THOMAS B. MILLER Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

DON RICHARDSON Executive Director

November 30, 2010

SCOOTMODS, INC. 10511 NALLEY ROAD UTICA KY 42376

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **SCOOTMODS, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2009, 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,

Frankie Eden, Revenue Auditor I Division of Corporation Tax 501 High Street, 6th Floor, Sta. 69 Frankfort, KY 40601 502-564-7394 FAX# 502-564-3392

Kentucky Secretary of State organization number 0728733

