Organization ID # 0779333 State of origin

Commonwealth of Kentucky Filing fee \$130.00 Alison Lundergan Grimes, Secretary of Sta

0779333.09

amcray PRPF

Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed: 1/8/2016 11:05 AM

Fee Receipt: \$130.00

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 **Reinstatement Annual Report** For the years 2015 through 2016

RST

Exact organization name and principal office address	<u>\$</u>
YOUR NEXT STEP, INC.	
437 EDGEWATER FOREST ROAD	
CORBIN KY 40701	

Registered Agent and Registered Office Address

LESLIE WAYNE FRAZIER

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.

437 EDGEWA	TER FORES	T ROAD			\$ 1841		
CORBIN, KY	40701				S. A. A.		
Principal Officers - Li specified, officer addresses defa	st the name, addre	es and title of all co	urrent officers. All o corations are requir	organizations mus red to list a Secre	it list at least one (1) office lary or other officer servin	er even in the case of a sole office of a sole office of a sole of	cer. If n
President	LESLIE W	AYNE FRAZI	ÈR 💮				
Sole Officer	LESLIÉ W	AYNE FRAZI	ER _ Z 🍑	<i>12</i> -1		<	

Sole Officer	LE	SLIE WA	YNE F	RAZIER .	E ^{rca}	Z.		<i>(</i> /-1)		*			
		/ <u> </u>	18	Ž.		<u>Julia</u>		1		No.		V	
				7,	XX.	Ti	3/1	A		N			
Directors - List the name a director addresses default to the				applicable).No list	ling c	of dire	cton	s is ve	rification that the corpora	atio	n has dispe	nse	d with directors. If not specified,
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The above entity was administratively dissolved on September 12, 2015 because the entity did not file its annual report for the year 2015. 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 2718.14-210. 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 YOUR NEXT STEP, 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 of dfficer or chairman of the board (Requir



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKSExecutive Director

January 8, 2016

YOUR NEXT STEP, INC. 437 EDGEWATER FOREST ROAD CORBIN KY 40701

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **YOUR NEXT STEP**, **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,

Erika REV3847, Revenue Auditor I Pass Through Entity Branch 501 High Street, Mail Station 69 Frankfort, KY 40601 Phone: (502) 564-2039

Phone: (502) 564-2039 Fax: (502) 564-3392

Kentucky Secretary of State organization number 0779333





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: 01/08/2016
YOUR NEXT STEP, 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,

Beverly Dearborn Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621

Phone: (502) 564-2272

Kentucky Secretary of State organization number 0779333

