Questinization ID # 0050805 State of origin KY

Commonwealth of Kentucky Filling fee \$145.00 Alison Lundergan Grimes, Secretary of St

0850835.09

Dcornish **PRPF**

Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 5/25/2018 10:13 AM Fee Receipt: \$145.00

RST

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 2016 through 2018

Exact organization name and principal office address NEXT LEVEL CONTRACTORS, INC

The principal office address and registered agent name/office address cannot be changed on this

400 SOUTH 19TH STREET LOUISVILLE KY 40203-1504		addresses reinstatem filed online	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 <u>app,sos.ky.gov/ftsearch</u> or can be downloaded from our website.	
BENNIE P. 400 SOUTI LOUISVILL	H 19TH STREET LE, KY 40203-1504		Ontional)	
company's information		y tax return as a disregarde		
Principal Officers specified, officer addresses	 List the name, address and title of all current of s default to the principal office address. Corporations 	ficers. All organizations must list at least one (1) offic s are required to list a Secretary or other officer servi	eer, even in the case of a sole officer. If not ng as records custodian	
President	BENNIE BERRY	3606 Graland Av	e Louisella by 40211	
	ame and address of all directors (if applicable).No it to the principal office address.	isting of directors is verification that the corporation h	nas dispensed with directors. If not specified,	
BENNIE BERRY				
The undersigned sta	ates that the grounds for dissolution eit	r 1, 2016 because the entity did not file her did not exist or have been eliminate the amount of \$145.00, payable to Ken	d, and the entity's name satisfies the	
		es the Kentucky Department of Revenu NC. to the Secretary of State, as require		
If not an officer of sa	aid entity, please provide a Declaration	of Power of Attorney with the Reinstate	ement Application.	
XX For	Kn	Precedit	522-18	
Signature of officer	or chamman of the board (Required)	Title (Required)	Date (Required)	

Website: www.revenue.kv.gov Phone: 502-564-8139

May 25, 2018

0850835

502-564-0058 Fax:

Notice Date:

KY SoS Org. ID:

NEXT LEVEL CONTRACTORS, INC. PO BOX 34685 LOUISVILLE, KY. 40211

Letter of Good Standing Request - Approved

SUMMARY You requested a letter of good standing, and your entity is in **good**

standing with the Department of Revenue.

OUR DETERMINATION We verified the following information.

1. You are registered with the Department of Revenue.

2. An authorized person requested this letter.

- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 4. 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.

RE:

- WHAT YOU NEED TO DO 1. 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.
 - 2. 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.
 - 3. 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: John REV3858, Revenue Auditor I

Email: John.Cornett@ky.gov

Direct: 502-564-2099



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: 05/25/2018	
NEXT LEVEL CONTRACTORS, 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 0850835

