Organization ID # 0265136 State of origin

Commonwealth of Kentucky Filing fee \$145.00 Alison Lundergan Grimes, Secretary of S

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**PRPF** Alison Lundergan Grimes

**Kentucky Secretary of State** Received and Filed: 3/21/2013 12:25 PM Fee Receipt: \$145.00

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 2011 through 2013

Exact organization name and principal office address THOROBRED AUTOMOTIVE, INC. 8104 BLUE LICK RD. **LOUISVILLE KY 402194308** 

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 and Registered Office Address

BERNIE FREDERICK 8104 BLUE LICK RD. LOUISVILLE, KY 40219



|  |                              | current officers. All organizations must list at least one (1) officer, eorprorations are required to list a Secretary or other officer serving as           |   |
|--|------------------------------|--|---|
| Vice President   | BERNIE FREDERICK             |  |   |
| Treasuror  | KENNETH FREDERIC             |  |   |
| President  | BERNIE FREDERICK             |  |   |
| Secretary  | KENNETH FREDERIC             | 3 4 4  |   |
| Directors - List the name of director addresses default to the |                              | cable).No listing of directors is verification that the corporation has di   | spensed with directors. If not specified, |
|  |                              |  |   |
|  |                              |  |   |
|  |                              |  |   |
| 2011. The undersigned  | states that the grounds for  | September 10, 2011 because the entity did not file dissolution either did not exist or have been eliminal closed is a check in the amount of \$145.00, payab | ated, and the entity's name               |
|  |                              | authorizes the Kentucky Department of Revenue to<br>IVE, INC. to the Secretary of State, as required for   |   |
| If not an officer of said a                                    |                              | 1 - 40 45 Day 45 Attains   |   |
| in not an pincer of said 5                                     | ntity, please provide a Decl | laration of Power of Attorney with the Reinstatemer  | nt Application.                           |



THOMAS B. MILLER
Commissioner

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

**ELYSE WEIGEL**Deputy Commissioner

BOB BROOKS
Executive Director

March 21, 2013

THOROBRED AUTOMOTIVE, INC. 8104 BLUE LICK RD. LOUISVILLE KY 402194308

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **THOROBRED AUTOMOTIVE**, **INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2011, 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,

Janice Sexton, Taxpayer Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7310 FAX# 502-564-0058

Kentucky Secretary of State organization number 0265136





## 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 www.oet.ky.gov Joseph U. Meyer Secretary

William Monterosso
Executive Director

Date: 03/21/2013

THOROBRED AUTOMOTIVE, 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,

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

Kentucky Secretary of State organization number 0265136

