Organization ID # 0417136 **Commonwealth of Kentucky** State of origin KY
Filing fee \$130.00 Alison Lundergan Grimes, Secretary of Sta

0417136.09

balimonos

Alison Lundergan Grimes

**Kentucky Secretary of State** Received and Filed: 2/4/2016 1:06 PM Fee Receipt: \$130.00

K51

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

Exact organization name and principal office address APPLEROSE, INC. 126 LOOKOUT CT. **BARDSTOWN KY 40004** 

Registered Agent and Registered Office Address

DAVID RAY SIDERS 126 LOOKOUT CT. BARDSTOWN, KY 40004



The principal office address and registered agent

reinstatement is filed, the statement of change can be

filed online at app.sos.ky.gov/ftsearch or can be

downloaded from our website.

name/office address cannot be changed on this

form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the

| President                | DAVID RAY SIDER 5  |                                       |  |
|--------------------------|--|---------------------------------------|--|
| Secretary                | VICKIE ROSE SIDERS   |                                       | A STATE OF THE STA |
|                          | 1940 17  |                                       |  |
|                          |  |                                       | e de la companya de l |
|                          |  |                                       |  |
|                          | name and address of all directors (if applicable). No lis<br>it to the principal office address. | ting of directors is verification th  | at the corporation has dispensed with directors. If not specified  |
| unector addresses detail | it to the principal office address.  |                                       |  |
|                          |  |                                       |  |
| <del></del>              |  | <del></del>                           |  |
| ·                        |  |                                       |  |
|                          |  | · · · · · · · · · · · · · · · · · · · | a uranin i   |
|                          | Facility.  |                                       |  |
| The above entity w       | gned states that the grounds for dissolution   | on either did not exist or            | ne entity did not file its annual report for the year<br>have been eliminated, and the entity's name   |
| satisfies the requir     | ements of KRS 27 IB. 14-2 IU. Enclosed is  | s a check in the amount               | of \$130.00, payable to Kentucky State Treasu  |
| satisfies the requir     | erjury, the below signed hereby authorize  | es the Kentucky Departn               | nent of Revenue to release any applicable tax<br>for reinstatement pursuant to KRS 271B.14-220   |

Lease Hote: the NAME is DAVID RAY SIDERS



DANIEL P. BORK
Commissioner

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

**ELYSE WEIGEL**Deputy Commissioner

BOB BROOKS
Executive Director

February 4, 2016

APPLEROSE, INC. 1413 N. 3RD ST BARDSTOWN, KY. 40004

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **APPLEROSE**, **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,

Stephanie REVX219, Taxpayer Services Specialist I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2028 FAX# 502-564-3392

Kentucky Secretary of State organization number 0417136





## 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: 02/04/2016   |
|--|
| APPLEROSE, 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,   |
| Jessica Harris Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272   |



Kentucky Secretary of State organization number 0417136