Organization ID # 0672437 State of origin

Commonwealth of Kentucky Filing fee \$115.00 Alison Lundergan Grimes, Secretary of Sta

0672437.09

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Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 2/12/2019 12:33 PM Fee Receipt: \$115.00

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 year 2018

Exact organization name and principal office address ALLSTANDS, INC. 10405 HIGHWAY 44 EAST **MOUNT WASHINGTON KY 40047**

Registered Agent and Registered Office Address

CHRIS SEAMAN 102 LAUREL DRIVE **PO BOX 129** BARDSTOWN, KY 40004

If the above company is included in a parent company's Kentucky tax return as a disregarded

downloaded from our website.

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

name/office address cannot be changed on this

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

FEIN:			_
Principal Office specified, officer addres	FS - List the name, address and title of all current ses default to the principal office address. Corporation	officers. All organizations must list at least one (1) officers 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	SAGEXXGEAMAR	Chris Seaman Sr.	
Secretary	CASEY SEAMAN		
Treasurer	CASEY SEAMAN		
	e name and address of all directors (if applicable).N	b listing of directors is verification that the corporation h	nas dispensed with directors. If not specified,
CASEY SEAMAI			
			· · · · · · · · · · · · · · · · · · ·
The undersigned	states that the grounds for dissolution of	per 16, 2018 because the entity did not file wither did not exist or have been eliminate in the amount of \$115.00, payable to Ker	ed, and the entity's name satisfies the
•			
Under penalty of printed information pertain	perjury, the below signed hereby author ning to ALLSTANDS, INC. to the Secre	izes the Kentucky Department of Revent tary of State, as required for reinstateme	ue to release any applicable tax nt pursuant to KRS 271B.14-220.
If not an officer of	said entity, please provide a Declaration	n of Power of Attorney with the Reinstate	ement Application.
x - C	200 Long Pre	sident	12/20/18
Signature of office	cer or chairman of the board (Required)	Title (Required)	Date (Required)

Website: www.revenue.kv.gov Phone: 502-564-8139 502-564-0058 Fax:

Notice Date:

February 12, 2019

KY SoS Org. ID: 0672437

ALLSTANDS, INC. **10210 SADDLE POINT DR LOUISVILLE KY 40291**

RE: 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.

- 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: Brad REVX069, Taxpayer Services Specialist II

Email: BradleyL.Butcher@ky.gov

Direct: 502-564-2055



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: 02/12/2019
ALLSTANDS, 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,
Richard Lemay Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272



Kentucky Secretary of State organization number 0672437