Organization ID # 0148439 Commonwealth of Kentucky State of origin KY
Filing fee \$175.00 Alison Lundergan Grimes, Secretary of Sta

0148439.09

mstratton PRPF

Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 11/19/2013 2:26 PM Fee Receipt: \$175.00

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 2009 through 2013

RST

Date (Required)

Exact organization name and principal of MITCHELL SALES COMPANY 616 WEST 9TH STREET OWENSBORD KY 42301	Mice address 408 State Route verniere, Kyy	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.s.os.ky.gov/ftsearch or can be downloaded from our website.
Registered Agent and Registered Office A GEORGE E. STRICKLER, JR. 1010 COLLEGE STREET BOWLING GREEN, KY 42101		us list at least one (1) officer, even in the case of a sole officer. If not
specified, officer addresses default to the principal office addres	s Corposations are required to list a Sec	return or other officer serving as records custodian
Sole Officer LAWRENCE MITC	HELL	
lizabeth Mitchell		
DIFECTORS - List the name and address of all directors (if a frector addresses default to the principal office address.	applicable).No listing of directors is varific	ation that the corporation has dispensed with directors. If not specified
AWRENCE MITCHELL		
zaloethMitchell		
120		2 M/m & 1/M
2009. The undersigned states that the grounds	for dissolution either did not ex	e the entity did not file its annual report for the year kist or have been eliminated, and the entity's name nount of \$175.00, payable to Kentucky State Treasur
Under penalty of perjury, the below signed here	by authorizes the Kentucky De	partment of Revenue to release any applicable tax ate, as required for reinstatement pursuant to KRS
f not an officer of said entity, please provide a l	Declaration of Power of Attorna	with the Reinstatement Application.
	solo oldi	

Mittle (Required)



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 Thomas O. Zawacki Secretary

Buddy Hoskinson Executive Director

Date: 11/19/2013

MITCHELL SALES COMPANY

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 0148439





THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

November 19, 2013

MITCHELL SALES COMPANY 4408 STATE ROUTE 1080 LIVERMORE, KY 42352

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **MITCHELL SALES COMPANY** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2012, 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,

Mark Kuyper, Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2118 FAX# 502-564-0058

Kentucky Secretary of State organization number 0148439

