Organization ID # 0848539 State of origin

Commonwealth of Kentucky Filing fee \$130.00 Alison Lundergan Grimes, Secretary of St

0848539.09

bAlimonos PRPF

Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 2/23/2018 11:24 AM Fee Receipt: \$130.00

RST

Date (Required)

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 2017 through 2018

Exact organization name and principal office address CLERMONT ENTERPRISE INCORPORATED 995 CLERMONT ROAD **SHEPHERDSVILLE KY 40165**

Signature of officer or chairman of the board (Required)

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.

FEIN (O-4:---I)

Registered Agent ar	d Registered Office Address	EEIN (Optional)
Arif Keshvar		
995 Clermor	nt Road	
Shepherdsy	lle, KY 40165	
f the above company is	included in a parent company's Kentucky	tax return as a disregarded
company's information		
EIN:	Name:	
D	Links and the second of the se	All and the second first state of the second
		pers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not here required to list a Secretary or other officer serving as records custodian
President	ARIF KESHWANI	to required to list to cocordary or control relief at reservoir and an activities and activities activities and activities activities and activities activities and activities activities activities and activities
		
Vice President	NAUSHAD KESHWANI	
Nimondono Listabo	no and address of all dispetors (if applicable) No lie	ing of directors is verification that the corporation has dispensed with directors. If not specified,
	the principal office address.	ing of directors is verification that the corporation has dispensed with directors. If not specified,
medior addresses delaun to	the principal office address.	
		9, 2017 because the entity did not file its annual report for the year 2017.
		er did not exist or have been eliminated, and the entity's name satisfies the
equirements of KRS	271B.14-210. Enclosed is a check in t	ne amount of \$130.00, payable to Kentucky State Treasurer.
Jnder penalty of peri	ury, the below signed hereby authorize	s the Kentucky Department of Revenue to release any applicable tax
		the Secretary of State, as required for reinstatement pursuant to KRS
271B.14-220.	,	,
fnot an officer of sai	d entity, please provide a Declaration	f Power of Attorney with the Reinstatement Application.
x All	ν - /·	RESIDENT 02-23-2018

Title (Required)

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

Notice Date: February 23, 2018

KY SoS Org. ID: 0848539

Clermont Enterprise Incorporated 995 Clermont Road Shepherdsville KY 40165

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: 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: 02/23/2018	
Clermont Enterprise Incorporated	
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 0848539

