Organization ID # 0621641 State of origin KY Filing fee \$130.00

# **Commonwealth of Kentucky** Michael G. Adams, Secretary of State

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Michael G. Adams **Kentucky Secretary of State** 

Received and Filed: 3/31/2021 7:39 AM Fee Receipt: \$130.00

Michael G. Adams 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 2020 through 2021

**RST** 

Exact organization name and principal office address COOPER PEST CONTROL INC. **PO BOX 344 LAGRANGE KY 40031** 

Registered Agent and Registered Office Address

JONATHAN MORRIS

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.

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	ANGE, KY 40031 any is included in a parent compa	my'e Kentucky tay return as a	disregarde		
	ation here (optional):	iny sprentucky tax return as a	i disregarde		<b>`</b>
FEIN:	Name:	<u></u>	<del></del> .		
Dringinal Office	ers - List the name, address and title	ef all auroat officers. All argenizat	ione must list at least one	1) officer even in the case	of a sole officer. If not
	esses default to the principal office addre				
President	JONATHAN MOR	RIS		Night # N	
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		The street	78.5	1. 12.44.44.18. 18.	
Directors					
	he name And address of all directors (if fault to the principal office address.	applicable).No listing of directors is	s vernication that the corpo	ration nas dispensed with di	rectors, if Not specified,
			A Service Contract		
-			A CONTRACTOR OF THE PROPERTY O	The Table 1 and Table 1	
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-			H. V.	## <b>#</b>	
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		1	The state of the s		
The above entity	was administratively dissolve	d on October 8, 2020 beca	use the entity did no	ot file its annual repor	t for the year 2020.
The undersigned	i states that the grounds for di	ssolution either did not exis	st or have been elim	inated, and the entity	's name satisfies the
requirements of	KRS 271B.14-210, Enclosed in	s a check in the amount of	\$130.00, payable to	Kentucky State Tre	asurer.
Under penalty of	perjury, the below signed her	eby authorizes the Kentucl	ky Department of Re	evenue to release any	/ applicable tax
	aining to COOPER PEST CON	TROL INC. to the Secreta	ry of State, as requir	ed for reinstatement	pursuant to KRS
271B:14-220:	14		حولمية والمستشهدة - التي التي التي التي التي التي التي التي		ني پينديند درد د ميندنده حميد
If not an officer of	of said entity, please provide a	Declaration of Power of At	ttorney with the Rein	istatement Applicatio	n.
X Col	m & Monio	Presid	[ 2 A ]		3-24-21
Signature of off	ficer Or chairman of the board (Required	)	Title (Required)	!	Date (Required)



# COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 <a href="https://kewes.ky.gov">https://kewes.ky.gov</a> UITax@KY.GOV

Date: 03/28/2021	
COOPER PEST CONTROL INC.	
Dear Sir/Madam:	

KRS 14A.7-030(1)(f) CERTIFICATE

The Office 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,

Tara Welch
Office of Unemployment Insurance
PO Box 948
Frankfort, Kentucky 40602-0948
Phone: (502) 564-2272

Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0621641



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

COOPER PEST CONTROL INC. **PO BOX 344** LAGRANGE KY 40031

Notice Date: March 26, 2021 KY SoS Org. ID:

0621641

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.

An authorized person requested this letter.

3. You filed income and LLE tax returns as required, or you are exempt from

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
  - 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: Dottye REV3769, Taxpayer Specialist I

Email: Dottye.Roberts@ky.gov

Direct: 502-564-0102