Organization ID # 0450042 State of origin

**Commonwealth of Kentucky** Filing fee \$160.00 Alison Lundergan Grimes, Secretary of Sta

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Alison Lundergan Grimes

**Kentucky Secretary of State** Received and Filed: 2/9/2015 2:28 PM Fee Receipt: \$160.00

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 2012 through 2015

Exact organization name and principal office address SPORTS ACTION, INC. **106 PARK STREET GRAYSON KY 41143** 

Registered Agent and Registered Office Address

**CHRIS HUDDLE** 106 PARK ST.

GRAYSON, KY 41143

The principal office address and registered agent

name/office address cannot be changed on this

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.

form. When reinstating, you cannot modify the

Treasurer	LINDA MCDAVID	
Secretary	JAMES HUDDLE	
Vice President	STEPHANIE HUDDLE	
President	CHRIS HUDDLE	
		and the company of the contract of the contrac
	me and address of all directors (if applicable).No list the principal office address.	ng of directors is verification that the corporation has dispensed with directors. If not specified,
director addresses default to	the principal office address.	ng of directors is verification that the corporation has dispensed with directors. If not specified,
director addresses default to CHRIS HUDDLE STEPHANIE HUDD	the principal office address.	ng of directors is verification that the corporation has dispensed with directors. If not specified,
director addresses default to CHRIS HUDDLE STEPHANIE HUDD JIM HUDDLE	the principal office address.	ng of directors is verification that the corporation has dispensed with directors. If not specified,
CHRIS HUDDLE	the principal office address.	ng of directors is verification that the corporation has dispensed with directors. If not specified,

2012. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 271B.14-210. Enclosed is a check in the amount of \$160.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to SPORTS ACTION, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

f not an officer of said entity, please provide a Declai	ration of Power of Attorney with the Reinstateme	nt Application. / /
x ( f. f. ddle	President	1/23/13
Signature of officer of chairman of the board (Required)	Title (Required)	/Date (Required)



THOMAS B. MILLER
Commissioner

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

**ELYSE WEIGEL**Deputy Commissioner

BOB BROOKS
Executive Director

February 9, 2015

SPORTS ACTION, INC. 106 PARK STREET GRAYSON KY 41143

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **SPORTS ACTION, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2013, 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,

Jessica REV0467, Revenue Auditor II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7317 FAX# 502-564-0058

Kentucky Secretary of State organization number 0450042





## 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: 02/09/2015	
SPORTS ACTION, INC.	
Dear Sir/Madam:	

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).

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

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 0450042

