Organization ID # 0687645 State of origin

Commonwealth of Kentucky Filing fee \$175.00 Alison Lundergan Grimes, Secretary of Sta

0687645.09

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Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 4/15/2014 1:08 PM Fee Receipt: \$175.00

K51

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 2010 through 2014

Exact organization name and principal office address

HANDFULS ON PURPOSE, INC. P.O. BOX 2535 140 3RD STREET **PIKEVILLE KY 41501**

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.

Registered Agent and Registered Office Address

CLIFTON DANIELS 140 3RD STREET PIKEVILLE, KY 41501

President	ERIC FORD	
Vice President	GERALD JUSTICE	
Treasurer	THOMAS MCCOY	
Secretary	BRANDON BLACKBURN	
office address.		directors of the non-profit must be listed. If not specified, director addresses default to the principal
office address. CLINTON DANIELS	<u> </u>	directors of the non-profit must be listed. If not specified, director addresses default to the principal
Directors - Non-profit office address. CLINTON DANIELS BILLY RAY SALYE BRANDON BLACK	S RS	directors of the non-profit must be listed. If not specified, director addresses default to the principal

The above entity was administratively dissolved on November 2, 2010 because the entity did not file its annual report for the year 2010. 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 273.3181. Enclosed is a check in the amount of \$175.00, 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 HANDFULS ON PURPOSE, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

Vice-President



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

April 15, 2014

HANDFULS ON PURPOSE, INC. P.O. BOX 2535 140 3RD STREET PIKEVILLE KY 41501

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **HANDFULS ON PURPOSE**, **INC.** is exempt from filing a Kentucky Corporation Income Tax Return pursuant to KRS 141.040, KRS 141.0401 and KRS 136.070. This exemption does not apply to any other taxes administered by the Commonwealth of Kentucky. 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.

Any changes in the corporation's articles of incorporation, by-laws, method of reporting, name or address, or ruling by the Internal Revenue Service must be reported to this office.

Sincerely,

Matthew McLaughlin, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2169 FAX# 502-564-3392

Kentucky Secretary of State organization number 0687645

