Organization ID # 0889145 Commonwealth of Kentucky State of origin Filing fee \$130.00 Alison Lundergan Grimes, Secretary of S

0889145.09

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Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 9/28/2016 10:16 AM Fee Receipt: \$130.00

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 2015 through 2016

RST

Date (Required)

Exact organization name and principal office address MARTINGALE INC. 1001 NORTH YARNALLTON PIKE LEXINGTON KY 40511

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

JANEL DEBOER 1001 NORTH YARNALLTON PIKE **LEXINGTON, KY 40511**



Principal Officers - L specified, officer addresses det	ist the name, address and title of all current of fault to the principal office address. Compretions	fficers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not sare required to list a Secretary or other officer serving as records custodian	
President	Janel de Beer	1001 1/1/20 1111	105/1
Vice-President		LOO N. YARNAIL FIXE LEXINGTON IC	4
Secretary	Days So Gan	1001 N GARNAII for Pike bexington ky vos	-6
Treasurer	David De Breeze	The state of the s	
Directors - List the name	and address of all disasters (if applicable) his !!		
director addresses default to the	e principal office address.	sting of directors is verification that the corporation has dispensed with directors. If not specified,	
	· · · · · · · · · · · · · · · · · · ·		
The above entity was a	dministratively dissolved on Septem	ber 12, 2015 because the entity did not file its annual report for the year	
40 ID. THE UNUERSIGNED	states that the grounds for dissolution	On either did not exist or have been eliminated, and the antitute and	
causines the requiremen	its of KN3 27 fb. 14-2 fg. Enclosed is	s a check in the amount of \$130.00, payable to Kentucky State Treasurer.	
Under penalty of perjun	v. the below signed hereby authorize	es the Kentucky Department of Poyonus to release and and its Link	
information pertaining to	o MARTINGALE INC. to the Secreta	ry of State, as required for reinstatement pursuant to KRS 271B.14-220.	
If not an officer of said e	entity, please provide a Declaration o	of Power of Attorney with the Reinstatement Application.	
Y	D.C. 2	1) · · · · · / / / ·	
A Xaril C	U Kreen	Trisident/CEO 9/27/16	
Signature of officer or cr	nairman of the board (Required)	Title (Required) Date (Required)	



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

September 28, 2016

MARTINGALE INC. 1001 NORTH YARNALLTON PIKE LEXINGTON KY 40511

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **MARTINGALE INC.** has filed Kentucky Income Tax Returns through the tax year ended 2015, 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,

John REV3858, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2099 FAX# 502-564-3392

Kentucky Secretary of State organization number 0889145





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: 09/28/2016
MARTINGALE INC.
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 0889145