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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 7/13/2018 3:31 PM Fee Receipt: \$145.00

Organization ID # 0275946 Commonwealth of Kentucky
State of origin KY
Filing fee \$145.00 Alison Lundergan Grimes, Secretary of State

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 Annu For the years 2016 through

Exact organization name and principal office address

CLOSE-CUT ENTERPRISES, INC. P.O. BOX 1377 INEZ KY 41224 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. nos. by powfits anch or can be downloaded from our website.

FEIN (Optional)

Registered Agent and Registered Office Address

CHARLES R. LAFFERTY KY. HWY. 40, BOX 1377 INEZ, KY 41224

If the above company is included in a parent company's Kentucky tax return as a disregarded entity or a subsidiary, please provide the parent company's information here (optional):

Principal Officers	List the name, address and title of all current or default to the principal office address. Corporation	ficers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not are required to list a Secretary or other officer serving as records custodien
	ame and address of all directors (if applicable). No label to the principal office address.	isting of directors is verification that the corporation has dispensed with directors. If not specified,
		sting of directors is verification that the corporation has dispensed with directors. If not specified,
		sting of directors is verification that the corporation has dispensed with directors. If not specified,

The above entity was administratively dissolved on October 1, 2016 because the entity did not file its annual report for the year 2016. 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 \$145.00, 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 CLOSE-CUT ENTERPRISES, 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.

X Charles L. Loffed Signature of afficer or chairmail of the poured)

1/E5 i d ENT 7-10-18

Date (Required)

Date (Required)

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

July 13, 2018

0275946

502-564-0058 Fax:

Notice Date:

KY SoS Org. ID:

CLOSE-CUT ENTERPRISES, INC. P.O. BOX 1377 **INEZ KY 41224**

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.

RE:

- 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: 07/13/2018
CLOSE-CUT ENTERPRISES, 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 0275946

