Organization ID # 0110749 State of origin Filing fee \$130.00

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

0110749.09

Fee Receipt: \$130.00

dwilliams PRPF

Kentucky Secretary of State Received and Filed: 2/18/2022 7:55 AM

RST

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 2021 through 2022

Exact organization name and principal office address JEFFERSONTOWN TRANSMISSION SERVICE, INC. old Toylorsville N. 10610 FAYLORSVILLERD. 019 **JEFFERSONTOWN KY 40299**

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 https: \web.sos.ky.gov\ftsearch or can be downloaded

Registered Agent and Registered Office Address

ROBERT B.			
	TAYLORSVILLE RD. TOWN, KY 40299		
	•	ky tax return as a disregarded entity or a subsidiary, p	lease provide the parent
company's information h		,,,	
	vame:		
Principal Officers -	List the name, address and title of all curresses default to the principal office address	ent officers. All organizations must list at least one (1) officer. Corporations are required to list a Secretary or other officer	even in the case of a sole officer. serving as records custodian
President	ROBERT B KNIPP		
Secretary	TYLER B KNIPP		
Treasurer	TYLER B KNIPP		
	s default to the principal office address.).No listing of directors is verification that the corporation has	dispensed with directors. If Not
2021. The undersigne satisfies the requiren	ed states that the grounds for dissonents of KRS 271B.14-210. Enclos	ber 18, 2021 because the entity did not file its ar olution either did not exist or have been eliminat ed is a check in the amount of \$130.00, payable	ed, and the entity's name to Kentucky State Treasurer.
Under penalty of perjuinformation pertaining pursuant to KRS 2711	to JEFFERSONTOWN TRANSMIS	rizes the Kentucky Department of Revenue to re SSION SERVICE, INC. to the Secretary of State, a	lease any applicable tax is required for reinstatement
If not an officer of said	l entity, please provide a Declaration	on of Power of Attorney with the Reinstatement A	pplication.
X Tolet	B Kniss	0 3 H E P	2/10/22
Signature of officer Of	chairman of the hoard (Required)	Title (Required)	Date (Required)

X Fold B huas	0 JHEP	2/10/22
Signature of officer Or chairman of the board (Required)	Title (Required)	

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

Fax: 502-564-0058

JEFFERSONTOWN TRANSMISSION SERVICE, INC. 10610 TAYLORSVILLE RD.

Notice Date: KY SoS Org. ID: February 15, 2022

JEFFERSONTOWN KY 40299

0110749

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.
- 2. An authorized person requested this letter.
- 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.

- 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: Madison REV4528, Revenue Auditor I

Email: madison.chism@ky.gov

Direct: 502-564-3047



COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

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

Date: 02/15/2022
JEFFERSONTOWN TRANSMISSION SERVICE, 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,
Samantha Tabor unknown
Kentucky Secretary of State organization number 0110749

