Organization ID# 0130243 State of origin KY Filing fee \$130.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0790249.09

NPRF

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 2019 through 2020

Michael G. Adams **Kentucky Secretary of State** Received and Filed: 4/13/2020 9:31 AM Fee Receipt: \$130.00

Exact organizatio	on name and principal office address		The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the	
JUTSU A				
1687 TRIGG STREET			addresses until the reinstatement is filed. Once the	
LOUISVII	LLE KY 40213	filed online a	nt is filed, the statement of change can be at <u>app.sos.ky.gov/ftsearch</u> or can be from our website.	
Registered Agent	t and Registered Office Address	FEIN (O	ptional)	
PAUL CC				
1687 TRI				
	LLE, KY 40213	· ·		
f the above compar company's informati	ny is included in a parent company's Kentucky tax	k return as a disregarded e		
ompany s informati EIN:				
L114,				
Principal Office	FS - List the name, address and title of all current officers	s. All organizations must list at le		
	ses default to the principal office address. Corporations are	required to list a Secretary or other officer serving	as records custodian	
CEO	PAUL COFFEY		<u> </u>	
000	TONY WATSON			
office address. JEFF BRUCCHIE	ofit corporations must have at least three (3) directors. All directors. All directors. All directors.	rectors of the non-profit must be listed. If Not spe	coned, director addresses detault to the princip	
IICHAEL JOHN	SON			
THERON LEWIS				
UKE HAIRE				
CAITLIN WARDI	OW			
The undersigned s	was administratively dissolved on October 16 states that the grounds for dissolution either	did not exist or have been eliminated	I, and the entity's name satisfies th	
•	RS 273.3181. Enclosed is a check in the am			
Under penalty of p nformation pertain	perjury, the below signed hereby authorizes the hing to JUTSU AIKI INC. to the Secretary of	he Kentucky Department of Revenue State, as required for reinstatement p	e to release any applicable tax oursuant to KRS 271B.14-220.	
f not an officer of	said entity, please provide a Declaration of F	Power of Attorney with the Reinstater	nent Application.	
V	> // }	050	11 la 1 - 0 -	
<u>^</u>			41717020	
Signature of office	er Or chairman of the board (Required)	Title (Required)	Date (Required)	
•	· /			
	/			

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

502-564-0058 Fax:

JUTSU AIKI INC. 1687 TRIGG STREET **LOUISVILLE KY 40213** Notice Date: April 10, 2020 KY SoS Org. ID: 0790249

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.

- 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.

- 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: Megan REVY099, Taxpayer Services Specialist I

Email: MeganD.Roberts@ky.gov

Direct: 502-564-7310