Organization ID # 0480050 State of origin KY Filing fee \$115.00 <b>N</b>	Commonwealth of Kentuck lichael G. Adams, Secretary of	- I Kentucky Secretary of State
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Application Reinstatement Annual Re For the year 2020	
Exact organization name and prin BEASMASTER, LTD. 207 WOODLAWN ROAD SHELBYVILLE KY 40065	n 1 1 1 1 1 1 1 1 1 1 1	he principal office address and registered agent ame/office address cannot be changed on this orm. When reinstating, you cannot modify the ddresses until the reinstatement is filed. Once the sinstatement is filed, the statement of change can be ed online at <u>app.sos.ky.gov/fisearch</u> or can be ownloaded from our website.
Registered Agent and Registered BILL BEASEY 207 WOODLAWN RD. SHELBYVILLE, KY 40065 If the above company is included in a p company's information here (optional): FEIN:Name:	Office Address arent company's Kentucky tax return as a disregarded	
Principal Officers - List the name, ad specified, officer addresses default to the princip	dress and title of all current officers. All organizations must list at least on pal office address. Corporations are required to list a Secretary or other offi	e (1) officer, even in the case of a sole officer. If not cer serving as records custodian
President BILL BE		
Secretary LISA BE	-ASEY	
Directors - List the name And address of director addresses default to the principal office	all directors (if applicable). No listing of directors is verification that the con address.	poration has dispensed with directors. If Not specified,

The above entity was administratively dissolved on October 8, 2020 because the entity did not file its annual report for the year 2020. 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 \$115.00, 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 BEASMASTER, LTD. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

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

man of the board ( nature of officel Ør chai

10-10-20 Date (Required)

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0480050.09



## BEASMASTER, LTD. 207 WOODLAWN ROAD SHELBYVILLE KY 40065

Notice Date:	October 14, 2020
KY SoS Org. ID:	0480050

RE:	Letter of Good Standing Request - Approved You requested a letter of good standing, and your entity is in <b>good</b> <b>standing</b> with the Department of Revenue.	
SUMMARY		
OUR DETERMINATION	<ol> <li>We verified the following information.</li> <li>You are registered with the Department of Revenue.</li> <li>An authorized person requested this letter.</li> <li>You filed income and LLE tax returns as required, or you are exempt from filing.</li> <li>You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.</li> </ol>	
	This notice will remain current for 30 days from the notice date above.	
WHAT YOU NEED TO DO	<ol> <li>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.</li> <li>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.</li> <li>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.</li> </ol>	
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	



## COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

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

Date: 10/14/2020

BEASMASTER, LTD.

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,

Richard Lemay Office of Unemployment Insurance PO Box 948 Frankfort, Kentucky 40602-0948 Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0480050

