Organization ID # 0660452 State of origin

Filing fee

KY \$115.00

Commonwealth of Kentucky Trey Grayson, Secretary of State 0660452.09

darmstrong PRPF

Trey Grayson, Secretary of State

Received and Filed: 11/9/2010 2:28 PM Fee Receipt: \$115.00

Trey Grayson 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 year 2010

RST

Exact organization name and principal office address A-1 WILDWOOD INN, INC. 7809 U.S. 42 **FLORENCE KY 41042**

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

BRIAN C. DUNHAM 250 GRANDVIEW DRIVE SUITE 200 FT. MITCHELL, KY 41017



r micipal Officers	- Lide life liame, address and due of an outlent on	icors. All organizations must be at least one (1) officer, or	TOTAL TOTAL COLOR OF BEST OF CHICAL	
President	GURVIR S HIRA		LORENCE KY-41042	
Vice President	KAMAL N SACHDEVA	26 MARLIN AVE F		
Treasurer	SANGEETA SACHDEVA	# 2 UNIVERSAL AVE	# 2 UNIVERSAL AVE, "FOISON," NJ-07420	
Directors - List the name	me and address of all directors (if applicable).No li	sting of directors is verification that the corporation has di	spensed with directors.	
2010. The undersigned	ed states that the grounds for dissoluti	ber 2, 2010 because the entity did not file it ion either did not exist or have been elimina s a check in the amount of \$115.00, payab	ated, and the entity's name	
		es the Kentucky Department of Revenue to Secretary of State, as required for reinstat		
If not an officer of sai	d entity, please provide a Declaration	of Power of Attorney with the Reinstatemen	nt Application.	
X Gus	vir l. di	(RESIDENT	11-8-10	
Signature of officer of	r chairman of the board (Required)	Title (Required)	Date (Required)	



EDUCATION and WORKFORCE DEVELOPMENT CABINET OFFICE OF EMPLOYMENT AND TRAINING

Steven L. Beshear Governor

Tax Enforcement Branch 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone (502) 564-2272 Fax (502) 564-5442 www.oet.ky.gov Joseph U. Meyer Secretary

William Monterosso
Executive Director

Date: 11/09/2010

A-1 WILDWOOD INN, INC.

Dear Sir/Madam:

KRS 271B.14-220(1)(e) CERTIFICATE

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 271B.14-220(1)(e).

Sincerely,

John Coleman Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0660452





THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

DON RICHARDSON Executive Director

November 9, 2010

A-1 WILDWOOD INN, INC. 7809 U.S. 42 FLORENCE KY 41042

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **A-1 WILDWOOD INN, INC.** has filed Kentucky Income Tax Returns through the tax year ended December 31, 2009, 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,

Gary Horne, Revenue Program Officer Division of Corporation Tax 501 High Street, 7th Floor, Sta.52 Frankfort, KY 40601 502-564-7281 FAX# 502-564-0058

Kentucky Secretary of State organization number 0660452

