Organization ID # State of origin Filing fee

0406055

Commonwealth of Kentucky \$190.00 Elaine N. Walker, Secretary of State 0406055.09

dcornish **PRPF**

Elaine N. Walker, Secretary of State

Received and Filed: 2/10/2011 11:11 AM Fee Receipt: \$190.00

Elaine N. Walker 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 2006 through 2011

RST

Exact organization name and principal office address HYDROX, INC. P.O. BOX 175

560 PITCHFORK RIDGE RD. **SCOTTSVILLE KY 42164**

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

JAMES B. MYERS, III 104 ALTSHELTER AVE.

HURSE CAVE	:, NY 42/49		The state of the comment of the state of the			
	- C				6 4 7 S	
Daimainal Officers 11				\$2 - 11 a.a.h.		
Principal Officers - Lis						
specified, officer addresses defa-	ult to the principa	i office address, Corporat	ions are required to list a S	ecretary or other office	er serving as records custodian	
						

-p	To devide to and presidipal distact and cod. Compor	ations are required to ust a occie	trary of other officer serving as records custodian	
President	SARAH A MYERS			
Secretary	JAMES B MYERS III			
Directors - List the director addresses defaul	name and address of all directors (if applicable it to the principal office address.).No listing of directors is verificat	ion that the corporation has dispensed with directors. If not specifie	d,
			and the same of th	
			- 1	

The above entity was administratively dissolved on November 2, 2006 because the entity did not file its annual report for the year 2006. 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 2718.14-210. Enclosed is a check in the amount of \$190.00, 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 HYDROX, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

II IIVL ai	i officer of said efficity, please provide a De	sciatation of hower of Attorney with the Remstate	ement Application.
X	Sanch My	President	2/8/11
Sig	mature of officer or cylairman of the board (Required)	Title (Required)	↓ate (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: 02/10/2011			
HYDROX, INC.			
Dear Sir/Madam:			
	KRS 271B 14-220(1)	Ne) 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,

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

Kentucky Secretary of State organization number 0406055





THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

DON RICHARDSON Executive Director

February 10, 2011

HYDROX, INC. P.O. BOX 175 560 PITCHFORK RIDGE RD. SCOTTSVILLE KY 42164

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **HYDROX**, **INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2009, 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,

Velicia Martindale, Revenue Auditor Division of Corporation Tax 501 High Street, 7th Floor, Sta. 52 Frankfort, KY 40601 502-564-2194 FAX# 502-564-0058

Kentucky Secretary of State organization number 0406055

