Organization ID # 0643358 State of origin

Alison Lundergan Grimes

Secretary of State

P. O. Box 718

Frankfort, KY 40602-0718

(502) 564-3490 http://www.sos.ky.gov

Commonwealth of Kentucky Filing fee \$160.00 Alison Lundergan Grimes, Secretary of Sta

0643358.09

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Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 5/15/2012 12:52 PM Fee Receipt: \$160.00

Reinstatement Application and Reinstatement Annual Report For the years 2009 through 2012

RST

Exact organization name and principal office address STAN SIMMONS INSURANCE AGENCY, INC. **510 WEST BROADWAY LAWRENCEBURG KY 40342**

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

STAN SIMMONS 510 WEST BROADWAY LAWRENCEBURG, KY 40342



		ment officers. All organizations must list at least one (1) officer, even in the prations are required to list a Secretary or other officer serving as records or	
President	STAN SIMMONS		
Directors - List the name director addresses default to the		e).No listing of directors is verification that the corporation has dispensed to	with directors. If not specified,
-			
2009. The undersigned	d states that the grounds for dis	ovember 3, 2009 because the entity did not file its annu solution either did not exist or have been eliminated, ar used is a check in the amount of \$160.00, payable to Ke	nd the entity's name
Under penalty of perjuinformation pertaining pursuant to KRS 271B	to STAN SIMMONS INSURAN(horizes the Kentucky Department of Revenue to releas CE AGENCY, INC. to the Secretary of State, as required	e any applicable tax d for reinstatement
If not an officer of said	entity please provide a Declar	ation of Power of Attorney with the Reinstatement Appli	cation.
X	Jm.	Presimb	5/15/2012
Signature of officer or of	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: 05/15/2012

STAN SIMMONS INSURANCE AGENCY, INC.

Dear Sir/Madam:

KRS 14A.7-030(1)(f) CERTIFICATE

The Division 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,

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

Kentucky Secretary of State organization number 0643358





THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

May 15, 2012

STAN SIMMONS INSURANCE AGENCY, INC. 1080 BYPASS SOUTH SUITE 1 LAWRENCEBURG KY 40342

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **STAN SIMMONS INSURANCE AGENCY, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2011, 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,

Frankie Eden, Revenue Auditor II Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-7394 FAX# 502-564-3392

Kentucky Secretary of State organization number 0643358

