Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov Exact organization name and principal office address MICHAEL L. WILSON, INC. 4734 DIXIE HWY LOUISVILLE KY 40216 Registered Agent and Registered Office Address MICHAEL L. WILSON 4734 DIXIE HWY LOUISVILLE KY 40216 Registered Agent and Registered Office Address MICHAEL L. WILSON 4734 DIXIE HWY LOUISVILLE, KY 40216 Registered Agent and Registered Office Address MICHAEL L. WILSON 4734 DIXIE HWY LOUISVILLE, KY 40216 Registered Agent and Registered Office Address MICHAEL L. WILSON 4734 DIXIE HWY LOUISVILLE, KY 40216 Registered Agent and Registered Office Address MICHAEL L. WILSON 4734 DIXIE HWY LOUISVILLE, KY 40216 Registered Agent and Registered Office Address MICHAEL L. WILSON 4734 DIXIE HWY LOUISVILLE, KY 40216	Organization ID # 0416860 Commonwealth o State of origin KY Filing fee \$145.00 Alison Lundergan Grimes		-	0416860.09 balimono PRPf Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 6/23/2016 10:00 AM	
Aract organization name and principal office address         MICHAEL L. WILSON, INC.         4734 DIXIE HWY         LOUISVILLE KY 40216         Registered Agent and Registered Office Address         MICHAEL L. WILSON         4734 DIXIE HWY         LOUISVILLE KY 40216         Registered Agent and Registered Office Address         MICHAEL L. WILSON         4734 DIXIE HWY         LOUISVILLE, KY 40216    Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian	Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490	Reinstatement Annual Report		Fee Receipt: \$145.00	
MICHAEL L. WILSON 4734 DIXIE HWY LOUISVILLE, KY 40216 Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian	MICHAEL L. WILSON, INC. 4734 DIXIE HWY		name/office addre form. When reinst addresses until the reinstatement is fik filed online at <u>app</u> ;	ess cannot be changed on this ating, you cannot modify the reinstatement is filed. Once the ed, the statement of change can be <u>sos.ky.gov/ftsearch</u> or can be	
specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian	MICHAEL L. WILSON 4734 DIXIE HWY	ed Office Address			
President MICHAEL L WILSON	specified, officer addresses default to the princip				
	President MICHAE	L L WILSON			

Directors - List the name and address of all directors (if applicable).No listing of directors is verification that the corporation has dispensed with directors. If not specified, director addresses default to the principal office address.

The above entity was administratively dissolved on September 30, 2014 because the entity did not file its annual report for the year 2014. 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 \$145.00, 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 MICHAEL L. WILSON, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

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

Х SIDENT Signature of officer or chairman of the board (Required) itle (Required)



#### COMMONWEALTH OF KENTUCKY DIVISION OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION 275 E MAIN ST, 2-EH FRANKFORT, KY 40621-0001 (502) 564-2272 <u>https://kewes.ky.gov</u> DES.UIT@KY.GOV

Date: 06/23/2016

MICHAEL L. WILSON, 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,

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

Kentucky Secretary of State organization number 0416860





DANIEL P. BORK Commissioner

#### FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

June 23, 2016

# MICHAEL L. WILSON, INC. 4734 DIXIE HWY LOUISVILLE KY 40216

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **MICHAEL L. WILSON, INC.** has filed Kentucky Income Tax Returns through the tax year ended 2015, 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,

John REV3858, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2099 FAX# 502-564-3392

Kentucky Secretary of State organization number 0416860





DANIEL P. BORK Commissioner

### FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

An Equal Opportunity Employer M/F/D

April 26, 2016

# MICHAEL L. WILSON, INC. 4734 DIXIE HWY LOUISVILLE KY 40216

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **MICHAEL L. WILSON, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2014, 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,

Ramon REV4636, Taxpayer Services Specialist I Pass Through Entity Branch 501 High Street, Mail Station 69 Frankfort, KY 40601 Phone: (502) 564-2169 Fax: (502) 564-3392

Kentucky Secretary of State organization number 0416860

