Organization ID# U4U4U63 State of origin

KY

Commonwealth of Kentucky Filing fee \$130.00 Alison Lundergan Grimes, Secretary of Sta 0404063.09

Alison Lundergan Grimes 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 2012 through 2013

Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 7/23/2013 2:11 PM Fee Receipt: \$130.00

Exact organization name and principal office address

TITLE LOANS, INC. 12484 US 60 **ASHLAND KY 41102**

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 Addre	iss .	FEIN (Ontional)			
TOM SALYER		T.				
12484 US 60						
ASHLAND, KY	(41102					
·		STOWN WE TO				
Principal Officers - Lis	it the name, address and title of all of	urrent officers. All organizations must li	st at y or other officer serving as tecords custodiar	pt		
President	SHEILA SALYER	Material are regulated to ast a occurrent	y a control of the co	<u> </u>		
Secretary	SHEILA SALYER					
Treasurer	SHEILA SALYER					
Vice President	TOM SALYER					
	W. F. and M. Carlotte V. M.					
Directors - List the name a director addresses default to the		ole). No listing of directors is verification	n that the corporation has dispensed with direc	tors. If not specified,		
	The second second					
			- 1/2 h / / / / / / / / / / / / / / / / / /			
The above entity was ac	lministratively dissolved on S	september 11. 2012 because	the entity did not file its annual re	port for the year		
2012. The undersigned	states that the grounds for di	ssolution either did not exist	or have been eliminated, and the nt of \$130.00, payable to Kentuck	entity's name		
satisfies the requiremen	ts of KRS 271B.14-210. Enc	losed is a check in the amou	nt of \$130.00, payable to Kentuck	y State Treasurer.		
Under penalty of perjury information pertaining to	, the below signed hereby at TITLE LOANS, INC. to the	ithorizes the Kentucky Depai Secretary of State, as require	rtment of Revenue to release any of for reinstatement pursuant to Ki	applicable tax RS 271B.14-220.		
			with the Reinstatement Application			
	// piodos piotido a Dom	The second secon		0/20/10		
X Son the	w	Vice Presid	JonT	1/23/13		
Signature of officer or on	airman of the board (Peguired)	Title (Rec	niřed) * *	Date (Required)		



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKSExecutive Director

July 23, 2013

TITLE LOANS, INC. 12484 US 60 ASHLAND KY 41102

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **TITLE LOANS**, **INC**. has filed Kentucky Income Tax Returns through the tax year ended 12/31/2012, 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,

Nicole McTiernan, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2062 FAX# 502-564-0058

Kentucky Secretary of State organization number 0404063





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 Thomas O. Zawacki Secretary

Buddy Hoskinson Executive Director

Date: 07/23/2013		
TITLE LOANS, INC.		
Dear Sir/Madam:		
	KRS 14A.7-030(1)(f) CERTIFICAT	E

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,

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

Kentucky Secretary of State organization number 0404063

