Organization ID # 0543563 Commonwealth of Kentucky State of origin KY
Filing fee \$145,00 Alison Lundergan Grimes, Secretary of State of St

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Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 9/2/2014 1:38 PM Fee Receipt: \$145.00

RST

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 2014

Exact organization name and principal office address TO BE, INC.

TO BE, INC. 3706 LEXINGTON ROAD LOUISVILLE KY 40207 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

TERRI L WALLER 4241 DARBROOK ROAD LOUISVILLE, KY 40207



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

11-111

President TERRILY		7271			THAILOUIC KI AO
VICE PKESIDENT CARA	KING	<u> 541</u>	Sunnysil	e Louis	· 11c Ky 40206
Directors - List the name and address of all director addresses default to the principal office addresses		f directors is verifica	tion that the corpora	tion has dispensed with	directors. If not specified,
TERRI L WALLER	4241	DARBRO	K R.AD	Louisville	KY 40207
CARA KING	541 5	SUNNYSID		VISVILLE K	Y 40206
The above entity was administratively 2012. The undersigned states that the	grounds for dissolution ei	ither did not exi	st or have beer	eliminated, and t	the entity's name
satisfies the requirements of KRS 271				• •	•
Under penalty of perjury, the below signiformation pertaining to TO BE, INC.					
If not an officer of said efitity, please p	rovide a Declaration of Po	ower of Attorney	with the Reins	tatement Applicat	ion.
X/ MIO.	VI	ce pre	SIDENT		8-5-14
Signature of officer 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 Thomas O. Zawacki Secretary

Buddy Hoskinson Executive Director

Date: 09/02/2014		
TO BE, INC.		
Dear Sir/Madam:		
	KRS 14A.7-030(1)(f) CERT	IFICATE

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 0543563





THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

September 2, 2014

TO BE, INC. 3706 LEXINGTON ROAD LOUISVILLE KY 40207

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **TO BE, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2013, 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,

Becky REV0679, Taxpayer Services Specialist I Pass Through Entity Tax Branch 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2117 FAX# 502-564-3392

Kentucky Secretary of State organization number 0543563

