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

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balimonos LRPF

Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 1/21/2015 2:08 PM Fee Receipt: \$160.00

NOT

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 2011 through 2014

Exact limited liability company name and principal office address

JOB PRO SERVICES, LLC

307 SOUTH CHADWICK ROAD

LOUISVILLE KY 40222

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 <a href="mailto:app.sos.ky.gov/ftsearch">app.sos.ky.gov/ftsearch</a> or can be downloaded from our website.

## Registered Agent and Registered Office Address

P. MARK FORD 307 SOUTH CHADWICK ROAD LOUISVILLE, KY 40222



| <b>200.01.222</b> , 11. 10222                    |  |                                |
|--|--|--------------------------------|
|  | liability company's managers. If not specified, addresses default to the LLC's p | orincipal office address.      |
| 841LLIP MARK FORD                                | 115 TANGLEWOOD TRAIL   | L, LOU. K9. 4022               |
|  |  |                                |
|  |  |                                |
|  |  |                                |
| The above entity was administratively dissolv    | ved on September 10, 2011 because the entity did not file                        | its annual report for the year |
| 2011. The undersigned states that the groun      | ds for dissolution either did not exist or have been eliminate                   | ted, and the entity's name     |
| satisfies the requirements of KRS 275.295. E     | Enclosed is a check in the amount of \$160.00, payable to h                      | Kentucky State Treasurer.      |
| Under penalty of perjury, the below signed he    | ereby authorizes the Kentucky Department of Revenue to                           | release any applicable tax     |
|  | ES, LLC to the Secretary of State, as required for reinstate                     | ment pursuant to KRS           |
| 271B.14-220.                                     |  |                                |
| If not an officer of said entity, please provide | a Declaration of Power of Attorney with the Reinstatement                        | t Application.                 |
| x PMJ  | PRESIDENT  | 1-10-15                        |
| Signature of member or manager (Required)        | Title (Required)   | Date (Required)                |



THOMAS B. MILLER
Commissioner

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

**ELYSE WEIGEL**Deputy Commissioner

**BOB BROOKS**Executive Director

January 21, 2015

JOB PRO SERVICES, LLC 115 TANGLEWOOD TRAIL LOUISVILLE, KY. 40223

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **JOB PRO SERVICES**, **LLC** 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 limited liability company. This letter is valid for 30 days from the date of this letter.

Sincerely,

Lamarr REV1367, Revenue Auditor II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7315 FAX# 502-564-0058

Kentucky Secretary of State organization number 0764864

