Organization ID # State of origin Filing fee

0566168

Elaine N. Walker

Secretary of State

P. O. Box 718

Frankfort, KY 40602-0718

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

**Commonwealth of Kentucky** \$115.00 Elaine N. Walker, Secretary of State

0566168.09

**PRPF** 

Elaine N. Walker, Secretary of State

Received and Filed: 10/17/2011 11:20 AM Fee Receipt: \$115.00

**Reinstatement Application and Reinstatement Annual Report** For the year 2011

RST

Exact organization name and principal office address

JNL INC. 10868 APPALOOSA DRIVE **WALTON KY 41094** 

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

NATIONAL REGISTERED AGENTS INC 400 WEST MARKET STREET **SUITE 1800** LOUISVILLE, KY 40202



Sole Officer	JOSPEH LONNEMAN			
	Service Control			
	a arus			
N: 4				
JIFECTOFS - List the name a irector addresses default to the	,	e). No listing of directors is verification that the corporation has dispensed with directors. If not specified,		
JOSEPH LONNEMAN				
	ostatada di sala di sala da sa	eptember 10, 2011 because the entity did not file its annual report for the year		
2011. The undersigned s	tates that the grounds for dis	solution either did not exist or have been eliminated, and the entity's name		
2011. The undersigned statisfies the requirement	states that the grounds for dis s of KRS 271B.14-210. Enclo	solution either did not exist or have been eliminated, and the entity's name used is a check in the amount of \$115.00, payable to Kentucky State Treasurer		
2011. The undersigned statisfies the requirement Under penalty of perjury,	states that the grounds for dis s of KRS 271B.14-210. Enclo the below signed hereby aut	solution either did not exist or have been eliminated, and the entity's name		
2011. The undersigned s satisfies the requirement Under penalty of perjury, nformation pertaining to	states that the grounds for dis s of KRS 271B.14-210. Enclo the below signed hereby aut JNL INC. to the Secretary of	solution either did not exist or have been eliminated, and the entity's name used is a check in the amount of \$115.00, payable to Kentucky State Treasurer horizes the Kentucky Department of Revenue to release any applicable tax		

Signature of officer or chairman of the board (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

October 17, 2011

JNL INC. 10868 APPALOOSA DRIVE WALTON KY 41094

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **JNL INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/10, 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 Breeze, Taxpayer Service 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 0566168





## 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: 10/17/2011			
JNL 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,

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 0566168

