Organization ID # 0227671 State of origin

Commonwealth of Kentucky Filing fee \$205.00 Alison Lundergan Grimes, Secretary of St

0227671.09

9/3/2015 1:00 PM

Fee Receipt: \$205.00

Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed:

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

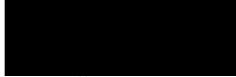
For the years 2009 through 2015

Exact organization name and principal office address C.N.L.S., INC. **101 EAST MAIN CROSS STREET BROWNSVILLE KY 42210**

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

GARY S. LOGSDON 101 EAST MAIN CROSS STREET **BROWNSVILLE, KY 42210**



President	GARY S LOGSDON		101 EAST MAIN CROSS STREET				
	······································		_BA	aurs	rille	Hy	FLLIO
	name and address of all directors (if a	oplicable).No listing of di	rectors is	verification the	at the corporation	has dispensed with	n directors. If not specified,
GARY S LOGSDON		101 EAST MAIN CLOSS STREET					
		BROWNS	UIL	CE, K	4 438	310	
				/		4754. T	
			· · · · · ·			N	
2009. The undersig	vas administratively dissolved gned states that the grounds f ements of KRS 271B.14-210.	or dissolution eithe	er did n	ot exist or	have been e	liminated, and	the entity's name
	erjury, the below signed herebing to C.N.L.S., INC. to the Se						
f not an officer of	said entity, plæase provide a D	eclaration of Powe	er of Att	orney with	the Reinsta	tement Applica	ition.
X	my/ fgc	PRO	EST	DEN	7		7-13-15
Signature of office	er of chairman of the board (Required)			Title (Require	ad)		Date (Required)



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

September 3, 2015

C.N.L.S., INC. 101 EAST MAIN CROSS STREET BROWNSVILLE KY 42210

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **C.N.L.S.**, **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,

Theresa REV0868, Taxpayer Services Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7288 FAX# 502-564-0058

Kentucky Secretary of State organization number 0227671





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 https://kewes.ky.gov DES.UIT@KY.GOV

Date: 09/03/2015
C.N.L.S., 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

Kentucky Secretary of State organization number 0227671

Division of Unemployment Insurance

275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272

