Organization ID# 0482371

Commonwealth of Kentucky State of origin KY
Filing fee \$115.00 Alison Lundergan Grimes, Secretary of Sta

0482371.09

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 amcray

PRPF

Date (Required)

Kentucky Secretary of State Received and Filed: 10/31/2018 12:58 PM Fee Receipt: \$115.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Exact organization name and principal office address INDUSTRIAL HOSE & SUPPLY, INC.

Signature of officer or chairman of the board (Required)

Reinstatement Application and Reinstatement Annual Report For the year 2018

72 SATELLITE LANE CALVERT CITY KY 42029			addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at <u>app.sos.ky.gov/itsearch</u> or can be downloaded from our website.
Registered Agent a	nd Registered Office Address		FEIN (Optional)
BRIAN SCOTT			
72 SATELL			<u> </u>
		cky tax return as a disregarded	
Principal Officers specified, officer addresses	 List the name, address and title of all currents default to the principal office address. Corporation 	t officers. All organizations must list are ons are required to list a Secretary or off	ast one (1) onicer, even in the case of a sole onicer. If not ter officer serving as records custodian
President	DONALD LUCAS		
Secretary	BRIAN SCOTT		
Treasurer	BRIAN SCOTT		
	ame and address of all directors (if applicable).No the principal office address.	lo listing of directors is verification that the	ne corporation has dispensed with directors. If not specified,
DONALD LUCAS			
The undersigned starequirements of KRS Under penalty of pe	ates that the grounds for dissolution of S 271B.14-210. Enclosed is a check rjury, the below signed hereby autho	either did not exist or have bee in the amount of \$115.00, pay rizes the Kentucky Departmen	ty did not file its annual report for the year 2018. en eliminated, and the entity's name satisfies the rable to Kentucky State Treasurer. et of Revenue to release any applicable tax te, as required for reinstatement pursuant to
KRS 271B.14-220.			•
	aid entity, please provide a Declaration	on of Power of Attorney with th	e Reinstatement Application.
X Brian S	cott se	cretary/treasurer	10/26/2018

Title (Required)

Website: www.revenue.kv.gov Phone: 502-564-8139 502-564-0058 Fax:

0482371

Notice Date: October 31, 2018

KY SoS Org. ID:

INDUSTRIAL HOSE & SUPPLY, INC. 72 SATELLITE LANE **CALVERT CITY KY 42029**

RE: Letter of Good Standing Request - Approved

SUMMARY You requested a letter of good standing, and your entity is in **good**

standing with the Department of Revenue.

OUR DETERMINATION We verified the following information.

1. You are registered with the Department of Revenue.

2. An authorized person requested this letter.

- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 4. You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.

This notice will remain current for 30 days from the notice date above.

- WHAT YOU NEED TO DO 1. If you are attempting to reinstate your entity, please provide a copy of this letter to the Kentucky Secretary of State within 30 days of the notice date above.
 - 2. If you are a for-profit corporation, you will also need to provide the Secretary of State a letter of good standing from the Division of Unemployment Insurance. Their telephone number is 502-564-6835.
 - 3. If you are a non-profit entity, please remember to file a copy of your tax returns with the Kentucky Attorney General. The charity filing requirements website is: http://ag.ky.gov/family/ consumerprotection/charity/Pages/registration.aspx.

CONTACT INFORMATION

If you have any questions regarding this notice, please contact me. Thank you.

Agent: Jessica REV3999, Revenue Program Officer

Email: Jessica.Roberts@ky.gov

Direct: 502-564-1056



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: 10/31/2018 INDUSTRIAL HOSE & SUPPLY, 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 Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621

Phone: (502) 564-2272

Kentucky Secretary of State organization number 0482371

