Organization ID # 0546176 State of origin

Commonwealth of Kentucky Filing fee \$115.00 Alison Lundergan Grimes, Secretary of S

0546176.09

Received and Filed: 3/30/2015 2:50 PM

Fee Receipt: \$115.00

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PRPF Alison Lundergan Grimes Kentucky Secretary of State

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 year 2014

NOI

Exact organization name and principal office address

NICK HOOPER PLUMBING, INC. **NICK HOOPER 3742 ZONETON RD SHEPHERDSVILLE KY 40165**

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

ROBERT NICHOLAS HOOPER 3742 ZONETON ROAD SHEPHERDSVILLE, KY 40165



Sole Officer	ROBERT N HOOPER			
		7		
	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	name and address of all directors (if applicable). Note to the principal office address.	o listing of directors is verific	ation that the corporation has dispensed with	directors. If not specified,
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	e de la companya de			
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		A Communication of the Communi		
2014. The undersig satisfies the require	as administratively dissolved on Septined states that the grounds for dissoments of KRS 271B.14-210. Enclose	lution either did not ex d is a check in the an	rist or have been eliminated, and to sount of \$115.00, payable to Kenti	the entity's name ucky State Treasurer.
Under penalty of perinformation pertaini 271B.14-220.	rjury, the below signed hereby autho ng to NICK HOOPER PLUMBING, IN	rizes the Kentucky De IC. to the Secretary of	partment of Revenue to release a State, as required for reinstateme	ny applicable tax ent pursuant to KRS
If not an officer of s	aid entity, please provide a Declaration	on of Power of Attorne	y with the Reinstatement Applicat	ion.
X Pobet 1	House	Ouner		3-25-15
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 WEIGELDeputy Commissioner

BOB BROOKSExecutive Director

March 30, 2015

NICK HOOPER PLUMBING, INC. NICK HOOPER 3742 ZONETON RD SHEPHERDSVILLE KY 40165

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **NICK HOOPER PLUMBING**, **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,

Vickie REVE230, Revenue Program Officer Pass Through Entity Tax Branch 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-7367 FAX# 502-564-3392

Kentucky Secretary of State organization number 0546176





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: 03/30/2015

NICK HOOPER PLUMBING, 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,

Matthew Justice Division of Unemployment Insurance 275 East Main Street, 2-EI Frankfort, Kentucky 40621

Phone: (502) 564-2272

Kentucky Secretary of State organization number 0546176

