Organization ID # 0932676 State of origin Filing fee \$115.00 Alison Lundergan Grimes, Secretary of State			0932676.09 amcray PRPF 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	Reinstateme	ent Application and ent Annual Report the year 2016	DET	
Exact organization name and pri MANDM CORP 3507 VERSAILLES LN LOUISVILLE KY 40219	ncipal office address	agent name/off on this form. V the addresses u the reinstateme can be filed onli	ffice address and registered fice address cannot be changed when reinstating, you cannot modify intil the reinstatement is filed. Once nt is filed, the statement of change ne at <u>app.sos.ky.gov/ftsearch</u> or ded from our website.	
specified, officer addresses default to the principal	TE 308B ress and title of all current officers. All o	organizations must list at least one (1) officer, ever red to list a Secretary or other officer serving as re 	cords custodian	
Secretary		rectors is verification that the corporation has disp ector addresses default to the principal office add		
The undersigned states that the group requirements of KRS 271B.14-210. If Under penalty of penjury, the below	inds for dissolution either did Enclosed is a check in the am signed hereby authorizes the	16 because the entity did not file its a not exist or have been eliminated, an ount of \$115.00, payable to Kentucky Kentucky Department of Revenue to s required for reinstatement pursuant t	d the entity's name satisfies the v State Treasurer. release any applicable tax	
· · · · · /	provide a Declaration of Powe	required for reinstatement pursuant to er of Attorney with the Reinstatement CESIDEWT Title (Required)		

Bint



DANIEL P. BORK Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

October 24, 2016

MandM Corp 3507 VERSAILLES LN Louisville KY 40219

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **MandM Corp** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2015, 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 0932676





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

Date: 10/24/2016

MandM Corp

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 0932676

