Organization ID # 0469780 State of origin KY Filing fee \$115.00 Commonwealth of Kentucky Michael G. Adams, Secretary of State						0469780.09 Michael G. Adams Kentucky Secretary of State Received and Filed: 2/26/2021 8:12 AM Fee Receipt: \$0.00		jclark	
Michael G. Ad		Poir	netato	mont /	Applicat	on and		<i>Q</i> of <i>Q</i>	
Secretary of S P. O. Box 7 Frankfort, KY 406 (502) 564-34 http://www.sos.k	18 02-0718 I90		nstate		Annual			RSI	
Event organization no	mo and prin					The principal of	fice address and	registered agent	<u> </u>
Exact organization na DE-CAL, INC. 128 PATTONS PENDLETON	CREEK RD		iaress		5 m	name/office add form. When reins addresses until the reinstatement is f	ress cannot be ch stating, you cannot ne reinstatement is iled, the statement b.sos.ky.gov/ftsea	hanged on this t modify the filed. Once the t of change can be	
Registered Agent and PAMELA C. W 128 PATTONS PENDLETON, If the above company is in company's information he FEIN:N	ARREN CREEK RD KY 40055 ncluded_in_a-pa			ax retur <u>n as</u> a	disregarde	FEIN (Ontio	onal)	nt	,
Principal Officers - L	ist the name add	tree and title of al	current office	ers All organizati	one must list at lead	t ope (1) officer eve	n in the case of a r	sale officer. If not	
specified, officer addresses def	ault to the princip	al office address. Co	prporations ar	e required to list	a Secretary or othe	r officer serving as r	ecords custodian		
President		WARREN		<u> </u>			14 - 14 - 14 - 14 - 14 - 14 - 14 - 14 -		
Secretary	PAMEL/	<u>A C WARREN</u>	·		·			<u> </u>	
Treasurer	_ PAMELA	C WARREN	· · · ·		<u> </u>	<u> </u>	per la <u>seconda seconda seconda</u>		
Vice President	PAMELA	C WARREN	<u> </u>	, r <u></u>					
Directors - List the name director addresses default to the			cable).No listii	ng of directors is	verification that the	corporation has dis	pensed with directo	ors. If Not specified,	
PAMELA C WARREN	<u> </u>			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
LYLE D WARREN					alina di Kabupatén Kirangan				
					ا الأيمو كاليه التر ا				
<u>.                                    </u>		<u>.                                    </u>	·						
	<u>i via in</u>	·. ·					<u></u>		
The above entity was a The undersigned states requirements of KRS 2	that the gro	unds for dissolu	October 8 Ition eithe	, 2020 beca r did not exis	st or have beer	did not file its ar eliminated, an	d the entity's r	name satisfies t	
Under penalty of perjun information pertaining to	y, the below s	signed hereby a	authorizes	the Kentuck	y Department	of Revenue to r	elease any ap	oplicable tax	
If not an officer of said	entitỳ, please	provide a Dec	laration of	Power of At	torney with the	Reinstatement	Application.		

Pomelec C. Warren Signature of officer Or chairman of the board (Required) X

ea Title (Required)

PA

-20 Date (Required)



## DE-CAL, INC. 128 PATTONS CREEK RD PENDLETON KY 40055

Notice Date:	February 25, 2021
KY SoS Org. ID:	0469780

RE:	Letter of Good Standing Request - Approved You requested a letter of good standing, and your entity is in <b>good</b> <b>standing</b> with the Department of Revenue.				
SUMMARY					
OUR DETERMINATION	<ol> <li>We verified the following information.</li> <li>You are registered with the Department of Revenue.</li> <li>An authorized person requested this letter.</li> <li>You filed income and LLE tax returns as required, or you are exempt from filing.</li> <li>You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.</li> </ol>				
WHAT YOU NEED TO DO	<ol> <li>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.</li> <li>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.</li> <li>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.</li> </ol>				
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Megan REVY099, Taxpayer Services Specialist I Email: MeganD.Roberts@ky.gov Direct: 502-564-7310				



## COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 <u>https://kewes.ky.gov</u> UITax@KY.GOV

Date: 02/25/2021

DE-CAL, INC.

Dear Sir/Madam:

## KRS 14A.7-030(1)(f) CERTIFICATE

The Office 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 Office of Unemployment Insurance PO Box 948 Frankfort, Kentucky 40602-0948 Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0469780

