Commonwealth of Kentucky Organization ID # 0441087 State of origin Filing fee \$115.00 Alison Lundergan Grimes, Secretary of St

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Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 12/12/2018 10:29 AM Fee Receipt: \$115.00

RSI

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 2018

The principal office address and registered agent Exact organization name and principal office address MKS GROUP, INC. 320 UNITED COURT SUITE 7 **LEXINGTON KY 40509**

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 Office Address		FEIN (Optional)
SUSAN COLL		•	
320 UNITED (LEXINGTON,		,	
	ncluded in a parent company's Ker	ntucky tax return as a disregarde	
company's information he		itadity tax rotain as a dioregarde	
FEIN: 1	Name:		
		rent officers. All organizations must list at least or rations are required to list a Secretary or other of	ne (1) officer, even in the case of a sole officer. If not
President	SUSAN K COLLINS	lations are required to list a Secretary of other of	incer serving as records custodian
General Manager	THOMAS K RATHER	remove	
		rentive	
		- :	
			
).No listing of directors is verification that the co	poration has dispensed with directors. If not specified,
director addresses default to the	e principal office address.		
			
			
			
			
		 	
			d not file its annual report for the year 2018.
		n eitner did not exist or nave been e ck in the amount of \$115.00, payable	liminated, and the entity's name satisfies the
•		· •	•
Under penalty of perjur	y, the below signed hereby auth o MKS GROUP. INC. to the Se	norizes the Kentucky Department of cretary of State, as required for reins	Revenue to release any applicable tax statement pursuant to KRS 271B.14-220.
		ation of Power of Attorney with the R	
No. of Guid	errary, produce provide a booldre	-)
X Her		Pries ident	11/30/18
Signature of officer or c	hairman of the board (Required)	Title (Required)	Date (Required)

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

Notice Date:

December 12, 2018

KY SoS Org. ID: 0441087

490 BLUESKY PKWY **LEXINGTON KY 40509**

MKS GROUP, INC.

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: Bruce REV3968, Taxpayer Services Specialist I

Email: Bruce.Owens@ky.gov

Direct: 502-564-2038



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: 12/12/2018
MKS GROUP, 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 0441087