Organization ID # 0943787 Commonwealth of Kentucky State of origin KY
Filing fee \$115.00 Alison Lundergan Grimes, Secretary of State

0943787.09

balimonos **PRPF**

Received and Filed: 10/26/2017 1:55 PM Fee Receipt: \$115.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490

Reinstatement Application and Reinstatement Annual Report For the year 2017

RST

(302) 30-1-3	/ - -00				l l	
http://www.sos	.ky.gov					
Exact organization name and principal office address K5, INC. 2111 SOUTHWEST DRIVE MURRAY KY 42071				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.		
MURRAY, KY If the above company is company's information h	OUGH IWEST DRIVE / 42071 included in a parent c		tax return as a disregarde	FEIN (Optional		
Principal Officers - specified, officer addresses d	List the name, address and lefault to the principal office	nd title of all current offi address. Corporations	cers. All organizations must list at leas are required to list a Secretary or othe	st one (1) officer, even in t er officer serving as record	s custodian	
President	BARBARA	KONGH	2111 SOUTHWEST	DR. MURRAY	1, KY 42071	
Vice-President	BARGARA	Koualt	2111 Southwes	T DR. MURRAY	1, KY 42071	
Secretary	BARBARA	Kough	ZIII SOUTHWES	7 DR. MURR	AY, KY 42071	
Treasurer	BARBARA	KOUGH	ZIII SOUTHWES	K DR. MUKR	47, K7 42071	
Directors - List the nan			ting of directors is verification that the	e corporation has dispense	ed with directors. If not specified,	
Backaen Kou			s-nuces de. Mu	erry xy	42071	
The undersigned state requirements of KRS	es that the grounds t 271B.14-210. Enclo	for dissolution eith sed is a check in t	9, 2017 because the entity er did not exist or have been the amount of \$115.00, paya	n eliminated, and th able to Kentucky Sta	e entity's name satisfies the ate Treasurer.	
information pertaining	to K5, INC. to the S	ecretary of State,	es the Kentucky Department as required for reinstateme	nt pursuant to KRS	271B.14-220.	
If not an afficer of said	d entity, please prov	de a Declaration	of Power of Attorney with the	e Reinstatement Ap	plication.	
x Balra	a Koust	<u>~ F</u>	resident		10/23/17	
Signature of officer or	chairman of the boald (Re	quired)	Title (Required)		Date (Required)	



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: 10/26/2017
K5, 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 0943787



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

October 26, 2017

K5, INC. 2111 SOUTHWEST DRIVE MURRAY KY 42071

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **K5**, **INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2016, 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,

Bruce REV3968, Taxpayer Services Specialist I Pass Through Entity Branch 501 High Street, Mail Station 52 Frankfort, KY 40601 Phone# (502) 564-2038 Fax# (502) 564-0058

Kentucky Secretary of State organization number 0943787

