Drganization ID # 0018489 Commonwealth of State of origin KY Filing fee \$115.00 Alison Lundergan Grimes,		Kentucky Secretary of Stat	O018489.09 bschell PRPF Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 9/19/2012 3:43 PM	
Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Ap Reinstatement Ar For the year	oplication and nnual Report	RST	
BOX 1116 HOLLY HILL DR. FRANKFORT KY 4060 Registered Agent and Register DOROTHY HOLLAND 1116HOLLY HILL DR.	ID DIE, INCORPORATED	The principal office addr name/office address can form. When reinstating, yo addresses until the reinsta reinstatement is filed, the s filed online at <u>app.sos.ky</u> , downloaded from our webs	not be changed on this bu cannot modify the tement is filed. Once the statement of change can be gov/ftsearch or can be	
	ddress and title of all current officers. All organizations			
	ipal office address. Corporations are required to list a Second S	ecretary or other officer serving as records cu		
Directors - List the name and address of director addresses default to the principal office	f all directors (if applicable).No listing of directors is veri a address.	fication that the corporation has dispensed wi	th directors. If not specified,	
			· · · · · · · · · · · · · · · · · · ·	

The above entity was administratively dissolved on September 11, 2012 because the entity did not file its annual report for the year 2012. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 271B.14-210. Enclosed is a check in the amount of \$115.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to FRANKFORT TOOL AND DIE, INCORPORATED to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If pet an officer of said epitity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

Л ature of officer or ch rman o the board (I (lequired)

SIDENT Title (Required)

EDTEMBER (7, 2012 Pate (Required)



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 <u>www.oet.ky.gov</u> Joseph U. Meyer Secretary

William Monterosso Executive Director

Date: 09/19/2012

FRANKFORT TOOL AND DIE, INCORPORATED

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,

Chad Atha Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0018489





THOMAS B. MILLER Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

BOB BROOKS Executive Director

September 19, 2012

FRANKFORT TOOL AND DIE, INCORPORATED 1118 HOLLY HILL DR FRANKFORT, KY. 40601

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **FRANKFORT TOOL AND DIE**, **INCORPORATED** has filed Kentucky Income Tax Returns through the tax year ended 04/30/2012, 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,

Darrell Young Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2127 FAX# 502-564-3392

Kentucky Secretary of State organization number 0018489

