Organization ID # 0111692 **Commonwealth of Kentucky** State of origin Filing fee \$130.00 Alison Lundergan Grimes, Secretary of Sta Received and Filed:

0111692.09

mstratton PRPF

Alison Lundergan Grimes **Kentucky Secretary of State**

2/29/2016 12:32 PM Fee Receipt: \$130.00

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 years 2015 through 2016

RST

Exact organization name and principal office address JAMES C. SHEARER CO., INC.

1824 LASER LN **LOUISVILLE KY 40299** 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.

Registered Agent and Registered Office Address

DANIEL C. VITTITOE 4507 BISHOP LANE LOUISVILLE, KY 40218

1824 LASER LN Louisville Ky 4029

specified, officer addresses def	ault to the principal office address. Corporation	ns are required to list a Secretary or other officer serving	
President	DANIEL C VITTITUE	DANIELCVIT	TITOE
Secretary	DANIEL C VITTITUE	DANIEL C VIT	TITOE
Vice President	REBECCA S VITTITUE	REBECCASV	ITT I TOE
		REBECCAS V	
Directors - List the name director addresses default to the	and address or all directors (if applicable). No	listing of directors is verification that the corporation ha	s dispensed with directors. If not specified,
· · · · · · · · · · · · · · · · · · ·			anaus tames that
			
2015. The undersigned	states that the grounds for dissolu	mber 12, 2015 because the entity did not ution either did not exist or have been elim I is a check in the amount of \$130.00, pay	inated, and the entity's name
Under penalty of perjury information pertaining to 271B.14-220.	y, the below signed hereby authorized JAMES C. SHEARER CO., INC.	zes the Kentucky Department of Revenue to the Secretary of State, as required for	e to release any applicable tax reinstatement pursuant to KRS
If not an officer of said	entity, please provide a Declaration	n of Power of Attorney with the Reinstater	nent Application.
X Daniel	CUttle	PRESIDENT	2/23/15
Signature of officer or ch	airman of the board (Required)	Title (Required)	Date (Required)



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

February 29, 2016

JAMES C. SHEARER CO., INC. 1824 LASER LN LOUISVILLE KY 40299

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **JAMES C. SHEARER CO., INC.** has filed Kentucky Income Tax Returns through the tax year ended December 31, 2014, 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,

Gary REV1282, Revenue Program Officer Division of Corporation Tax 501 High Street, Mail Sta.52 Frankfort, KY 40601 502-564-7281 FAX# 502-564-0058

Kentucky Secretary of State organization number 0111692





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: 02/29/2016

JAMES C. SHEARER CO., 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,

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

Kentucky Secretary of State organization number 0111692

