Organization ID # 0472594 State of origin

**Commonwealth of Kentucky** Filing fee \$115.00 Alison Lundergan Grimes, Secretary of Sta Alison Lundergan Grimes Kentucky Secretary of State

0472594.09

mstratton **PRPF** 

**Alison Lundergan Grimes** 

Received and Filed: 10/31/2016 3:02 PM Fee Receipt: \$115.00

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 year 2016

**RST** 

**Exact organization name and principal office address** CLAYMAKER, INC. 332 BATES ROAD **ELIZABETHTOWN KY 42701** 

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 ar p.sos.ky.gov/ftsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

JAMES A. CLAYTON 332 BATES ROAD **ELIZABETHTOWN, KY 42701** 



Sole Officer	JAMES A CLAYTON		
	me and address of all directors (if applicable)	e).No listing of directors is verification that the corporation had	s dispensed with directors. If not specified,
JAMES A CLAYTO	N		
The above entity was	administratively dissolved on Oc	tober 1, 2016 because the entity did not file it	e annual report for the year 2016
The above chary was	tes that the grounds for dissolutior	n either did not exist or have been eliminated ick in the amount of \$115.00, payable to Kenti	. and the entity's name satisfies the
The undersigned stated requirements of KRS	27 IB. 14-2 IV. Enclosed is a chec		
requirements of KRS Under penalty of perj	ury, the below signed hereby auth	norizes the Kentucky Department of Revenue cretary of State, as required for reinstatemen	to release any applicable tax t pursuant to KRS 271B.14-220.
requirements of KRS Under penalty of perj information pertaining	ury, the below signed hereby auth g to CLAYMAKER, INC. to the Sec	norizes the Kentucky Department of Revenue	t pursuant to KRS 271B.14-220.



## 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: 10/31/2016
CLAYMAKER, 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,
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 0472594



DANIEL P. BORK
Commissioner

## FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

**ELYSE WEIGEL**Deputy Commissioner

October 31, 2016

CLAYMAKER, INC. 332 BATES ROAD ELIZABETHTOWN KY 42701

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **CLAYMAKER**, **INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2015, 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,

Nicole REVX129, Taxpayer Services Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2062 FAX# 502-564-0058

Kentucky Secretary of State organization number 0472594

