Organization ID # 0735495 State of origin KY Filing fee \$115.00 Aliso	Commonwealth of Kennergan Grimes, Se	•	0735495.09 Alison Lundergan Grimes Kentucky Secretary of State	
Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718	Reinstatement App Reinstatement Ann		Received and Filed: 10/1/2015 1:35 PM Fee Receipt: \$115.00	
(502) 564-3490 http://www.sos.ky.gov	For the year 2015			
Exact organization name and p CONTROL SYSTEMS D 5237 NASHVILLE RD., I BOWLING GREEN KY 4	ESIGN AND AUTOMATION, INC. BUILDING 1	name/office addro form. When reinst addresses until the reinstatement is fil	ce address and registered agent ress cannot be changed on this ating, you cannot modify the reinstatement is filed. Once the ad, the statement of change can be <u>sos.ky.gov/ftsearch</u> or can be ur website.	
Registered Agent and Register WILLIAM T. WADE, JR. 1010 COLLEGE STREE BOWLING GREEN, KY 4	T ¥2101			
specified, officer addresses default to the princip	dress and title of all current officers. All organizations mus bal office address. Corporations are required to list a Secre T SCHEIDEGGER	t list at least one (1) officer, even ary or other officer serving as re-	in the case of a sole officer. If not xords custodian	
Directors - List the name and address of director addresses default to the principal office ROBERT SCHEIDEGGER	all directors (if applicable).No listing of directors is verificat address.	on that the corporation has dispe	ensed with directors. If not specified,	
2015. The undersigned states that t satisfies the requirements of KRS 2	ly dissolved on September 12, 2015 becaus the grounds for dissolution either did not exis 71B.14-210. Enclosed is a check in the amo signed hereby authorizes the Kentucky Dep	st or have been eliminate ount of \$115.00, payable	d, and the entity's name to Kentucky State Treasurer.	

information pertaining to CONTROL SYSTEMS DESIGN AND AUTOMATION, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

X Signature of officer or chairman of the board (Required)

President itle (Required)

9/29/15 Date (Required)



THOMAS B. MILLER Commissioner

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

ELYSE WEIGEL **Deputy Commissioner** 

**BOB BROOKS Executive Director** 

October 1, 2015

## CONTROL SYSTEMS DESIGN AND AUTOMATION, INC. 5237 NASHVILLE RD., BUILDING 1 **BOWLING GREEN KY 42101**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate CONTROL SYSTEMS DESIGN AND AUTOMATION, 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 0735495







#### 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 <u>https://kewes.ky.gov</u> DES.UIT@KY.GOV

Date: 10/01/2015

## CONTROL SYSTEMS DESIGN AND AUTOMATION, 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,

Matthew Justice Division of Unemployment Insurance 275 East Main Street, 2-EI Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0735495

