Organization ID # 0299096 State of origin

Commonwealth of Kentucky Filing fee \$115.00 Alison Lundergan Grimes, Secretary of St

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Alison Lundergan Grimes

Kentucky Secretary of State Received and Filed: 11/30/2015 3:20 PM Fee Receipt: \$115.00

KOI

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 2015

Exact organization name and principal office address

PRIME HOTELS, INC. 860 LAKEVIEW DR. PADUCAH KY 42003

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

HARRY CHOPRA 860 LAKEVIEW DR. PADUCAH, KY 42003



Principal Officers specified, officer addresses	 List the name, address and title of all cu default to the principal office address. Corpo 	rrent officers. All organizations must list at least one (1) officer, evo prations are required to list a Secretary or other officer serving as	records custodian
Vice President	PAM CHOPRA		
President	HARI CHOPRA		
	me and address of all directors (if applicable the principal office address.	le).No listing of directors is verification that the corporation has di	spensed with directors. If not specified,
2015. The undersign	ed states that the grounds for dis	eptember 12, 2015 because the entity did not file	ated, and the entity's name
•		osed is a check in the amount of \$115.00, payab	
Under penalty of per information pertaining	jury, the below signed hereby au	thorizes the Kentucky Department of Revenue to e Secretary of State, as required for reinstatemen	release any applicable tax at pursuant to KRS 271B.14-220.
If not an officer of sa	d entity, please provide a Declar	ration of Power of Attorney with the Reinstatemer	nt Application.
X \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	90	Besident	11-1-15
Signature of officer	or chairman of the board (Required)	Title (Required)	Date (Required)



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

November 30, 2015

PRIME HOTELS, INC. 2880 JAMES SANDERS BLVD PADUCAH, KY. 42001

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **PRIME HOTELS, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2014, 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,

Jay REVX255, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2057 FAX# 502-564-0058

Kentucky Secretary of State organization number 0299096





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: 11/30/2015
PRIME HOTELS, 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 0299096

