Organization ID # 0643898 State of origin Filing fee

KY \$130.00

Commonwealth of Kentucky Trey Grayson, Secretary of State 0643898.09

bschell **PRPF**

Trey Grayson, Secretary of State

Received and Filed: 1/25/2011 8:37 AM Fee Receipt: \$130.00

Trey Grayson 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 2010 through 2011

RST

Exact organization name and principal office address

EXTREME MOBILITY, INC. 2251 REGENCY ROAD **SUITE 105 LEXINGTON KY 40503**

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

DAVID ADAIR 2551 REGENCY ROAD SUITE 105 LEXINGTON, KY 40503



	ist the name, address and title of all ault to the principal office address. Co				
President	DAVID ADAIR				
Vice President	FLENN FRANKLIN				
Directors - List the name director addresses default to the	and address of all directors (if applice principal office address.	cable).No listing of director	s is verification that the con	poration has dispensed wi	ith directors. If not specified,
DAVID ADAIR					
GLENN FRANLIN					
2010. The undersigned	dministratively dissolved on states that the grounds for nts of KRS 271B.14-210. En	dissolution either di	d not exist or have b	een eliminated, and	d the entity's name
information pertaining t 271B.14-220	y, the below signed hereby a control of EXTREME MOBILITY, INC.	C. to the Secretary of	of State, as required	for reinstatement p	ursuant to KRS
Xx	entity, please provide a Dec	laration of Power of	Le	instatement Applic	1/20/4
Signature of officer or ci	hairman of the board (Required)		Title (Required)		✓ Date (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 www.oet.ky.gov Joseph U. Meyer Secretary

William Monterosso
Executive Director

Date: 01/24/2011

EXTREME MOBILITY, INC.

Dear Sir/Madam:

KRS 271B.14-220(1)(e) CERTIFICATE

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 271B.14-220(1)(e).

Sincerely,

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

Kentucky Secretary of State organization number 0643898





THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

DON RICHARDSON Executive Director

January 24, 2011

EXTREME MOBILITY, INC. 2251 REGENCY ROAD SUITE 105 LEXINGTON KY 40503

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **EXTREME MOBILITY, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2009, 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,

Marcia Oakman, Revenue Auditor Division of Corporation Tax 501 High Street, 7th Floor, Sta. 52 Frankfort, KY 40601 502-564-7315 FAX# 502-564-0058

Kentucky Secretary of State organization number 0643898

