#### Organization ID # 0704338 **Commonwealth of Kentucky** State of origin KY Filing fee \$115.00 Alison Lundergan Grimes, Secretary of S

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PRPF

**Alison Lundergan Grimes** Kentucky Secretary of State Received and Filed: 1/25/2016 11:52 AM 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 2015

KOI

Exact organization name and principal office address ASHAB, INC. **500 HAPPY VALLEY ROAD** GLASGOW KY 42141

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



Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian

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|              | n that the corporation has dispensed with directors. If not specified,   |
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director addresses default to the principal office address

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The above entity was administratively dissolved on May 7, 2015 because the entity did not maintain its registered agent or registered office address in this state for sixty (60) days or more. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 271B.14-210. Enclosed is a check in the amount of \$115.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to ASHAB, 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.

of the board (Required) Signature of office

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DANIEL P. BORK Commissioner

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

ELYSE WEIGEL Deputy Commissioner

BOB BROOKS Executive Director

January 25, 2016

### ASHAB, INC. 500 HAPPY VALLEY ROAD GLASGOW KY 42141

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **ASHAB**, **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,

John REV3858, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2099 FAX# 502-564-0058

Kentucky Secretary of State organization number 0704338





#### 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: 01/25/2016

ASHAB, 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 0704338

