Organization ID # 0886783 State of origin

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

0886783.09

balimonos **PRPF**

Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 10/2/2015 11:48 AM Fee Receipt: \$115.00

RST

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

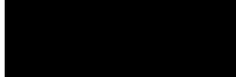
Reinstatement Application and **Reinstatement Annual Report** For the year 2015

Exact organization name and principal office address KENTUCKY BOURBON BARREL, INC. 1715 SULGRAVE ROAD **LOUISVILLE KY 40205**

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

timothy clore ratliff 1715 Sulgrave Road Louisville, KY 40205



The principal office address and registered agent

name/office address cannot be changed on this

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								
President Vice-President Secretary	Timothy	C RA	+1; + +		Sulgrave		Louisville	Ky 40205
Treasurer								
Directors - List the name and director addresses default to the pro-		s (if applicable).No listing of dire	ectors is verific	ation that the corporat	ion has dispens	ed with directors. If not spe	cified,
								
			·					
The above entity was adm 2015. The undersigned st satisfies the requirements	ates that the grou	nds for diss	solution eithe	r did not e	kist or have been	eliminated,	and the entity's nan	ne
Under penalty of perjury, information pertaining to KRS 271B.14-220								
If not an officer of said	ity, pl ease provid	e a Declara	ition of Powe	r of Attorne	ey with the Reins	tatement Ap	oplication.	
\times /////			Pres	ident			9/29/15	
Signature of officer of chair	man of the board (Requ	ired)		Title	(Required)		D≱te (Require	:d)



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: 10/02/2015 KENTUCKY BOURBON BARREL, 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 0886783





THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKSExecutive Director

October 2, 2015

KENTUCKY BOURBON BARREL, INC. 1715 Sulgrave Road Louisville KY 40205

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **KENTUCKY BOURBON BARREL**, **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,

Michael REVY105, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7316 FAX# 502-564-0058

Kentucky Secretary of State organization number 0886783

