

Organization ID # 0748300
State of origin KY
Filing fee \$130.00

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State



0748300.06 amcray LRPF
Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
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Fee Receipt: \$130.00

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 years 2016 through 2017**

Exact limited liability company name and principal office address

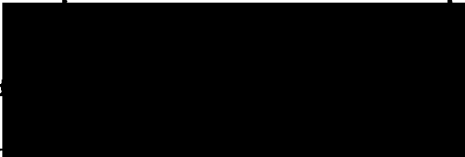
120 MT. ZION RD., LLC
3120 SUGARCAMP ROAD
COVINGTON KY 41017

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/ftssearch or can be downloaded from our website.

Registered Agent and Registered Office Address

TERRY WORKMAN
3120 SUGARCAMP ROAD
COVINGTON, KY 41017

FEIN (Optional)



If the above company is included in a parent company's Kentucky tax return as a disregarded company's information here (optional):
FEIN: _____ Name: _____

Members - List the name and address of the limited liability company's members. If not specified, addresses default to the LLC's principal office address.. Member-managed LLCs are not required to list their members.

TERRY WORKMAN	_____
DENISE WORKMAN	_____
_____	_____
_____	_____

The above entity was administratively dissolved on October 1, 2016 because the entity did not file its annual report for the year 2016. 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 275.295. Enclosed is a check in the amount of \$130.00, 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 120 MT. ZION RD., LLC 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 Terry Workman
Signature of member or manager (Required)

Partner
Title (Required)

5-8-17
Date (Required)



DANIEL P. BORK
Commissioner

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

June 26, 2017

**120 MT. ZION RD., LLC
3120 SUGAR CAMP ROAD
COVINGTON KY 41017**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **120 MT. ZION RD., LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2015, 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 limited liability company. This letter is valid for 30 days from the date of this letter.

Sincerely,

Bruce REV3968, Taxpayer Services Specialist I
Pass Through Entity Branch
501 High Street, Mail Station 69
Frankfort, KY 40601
Phone: (502) 564-2038
Fax: (502) 564-3392

Kentucky Secretary of State organization number 0748300