Organization ID # 1034200 State of origin KY Filing fee \$130.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

1034200.06

Bdennis LRPF

Michael G. Adams Kentucky Secretary of State Received and Filed:

7/7/2020 10:37 AM Fee Receipt: \$130.00

RST

Michael G. Adams 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 2019 through 2020

Exact limited	liability company name and principal office	ce address
DBL 1	TRANS LLC	
3416	NELINDA MAY DR	
LOUIS	ISVILLE KY 40213	

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	d Registered Office A	idress	pp piliteral		EN (Ontional)	
DAHIREN BE	NITEZ LOPEZ					
3416 NELINE						
LOUISVILLE,		amila Kaatuala sta	ratura ao a die	rocordod		
company's information he	included in a parent comp	any s nemucky ta	k return as a dis	aregardeu		
	Name:				man(162) 1998 1999 U	
Members - List the name LLCs are not required to list th		ability company's memi	pers. If not specifie	d, addresses default	to the LLC's principal offi	ce address. Member-managed
Dahiren Benitez	Lopez	С	wner			
		-	Tak.			
				i istina		
				Y PROCES		
						V.
The undersigned state	administratively dissolves that the grounds for a 275.295. Enclosed is a	dissolution either	did not exist o	r have been elir	minated, and the er	report for the year 2019. ntity's name satisfies the surer.
Under penalty of perjuinformation pertaining	ry, the below signed he to DBL TRANS LLC to	reby auth <mark>orizes</mark> t the Secretary of	he Kentucky I State, as req	Department of Full of Four Department of Full	levenue to release tement pursuant t o	any applicable tax KRS 271B.14-220.
If not an office of said	entity, please provide	a Declaration of I	Power of Attor	ney with the Re	instatement Applica	ation.
X Amb			Owner			04/16/2020
Signature of mem	nber Or manager (Required)		Tit	le (Required)		Date (Required)

Website: www.revenue.ky.gov Phone:

502-564-8139 502-564-0058 Fax:

DBL TRANS LLC 3416 NELINDA MAY DR **LOUISVILLE KY 40213**

Notice Date: July 7, 2020 KY SoS Org. ID: 1034200

RE: Letter of Good Standing Request - Approved

SUMMARY You requested a letter of good standing, and your entity is in **good**

standing with the Department of Revenue.

OUR DETERMINATION We verified the following information.

1. You are registered with the Department of Revenue.

2. An authorized person requested this letter.

- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 4. You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.

This notice will remain current for 30 days from the notice date above.

- WHAT YOU NEED TO DO 1. If you are attempting to reinstate your entity, please provide a copy of this letter to the Kentucky Secretary of State within 30 days of the notice date above.
 - 2. If you are a for-profit corporation, you will also need to provide the Secretary of State a letter of good standing from the Division of Unemployment Insurance. Their telephone number is 502-564-6835.
 - 3. If you are a non-profit entity, please remember to file a copy of your tax returns with the Kentucky Attorney General. The charity filing requirements website is: http://ag.ky.gov/family/ consumerprotection/charity/Pages/registration.aspx.

CONTACT INFORMATION

If you have any questions regarding this notice, please contact me. Thank you.

Agent: Dottye REV3769, Taxpayer Specialist I

Email: Dottye.Roberts@ky.gov

Direct: 502-564-0102

Website: www.revenue.ky.gov Phone:

502-564-8139 502-564-0058 Fax:

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