Organization ID # 1037700 State of origin KY Filing fee \$130.00 Mi	Commonwealth of Kentucky chael G. Adams, Secretary of	State Michael G. Adams Kentucky Secretary of State
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 Filed: 8/25/2020 9:07 AM Fee Receipt: \$130.00 Reinstatement Annual Report For the years 2019 through 2020	
Exact limited liability company nar BUTCHERTOWN HOUSE C 1025 E MAIN ST. LOUISVILLE KY 40206	nam DF BOOZE, LLC add rein filed	principal office address and registered agent ne/office address cannot be changed on this n. When reinstating, you cannot modify the resses until the reinstatement is filed. Once the statement is filed, the statement of change can be i online at <u>app.sos.ky.gov/ftsearch</u> or can be inloaded from our website.
Registered Agent and Registered C TRAVIS LAY 1025 E MAIN ST. LOUISVILLE, KY 40206 If the above company is included in a parer information here (optional): FEIN: Name:	Diffice Address FE	IN (Optional)
Managers - List the name And address of the the Name And addr	he limited liability company's managers. If not specified, addresses default the specified of the specified	to the LLC's principal office address.

The above entity was administratively dissolved on October 16, 2019 because the entity did not file its annual report for the year 2019. 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 BUTCHERTOWN HOUSE OF BOOZE, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 2748, 14-220.

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

X Munber Title (Required ember Or manager (Requ



BUTCHERTOWN H 57 Indian Hills Trail LOUISVILLE KY 40	OUSE OF BOOZE, LLC 207	Notice Date: KY SoS Org. ID:	August 24, 2020 1037700	
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 Depare 2. An authorized person requested to 3. You filed income and LLE tax returning. 4. You have no outstanding tax assess or have a valid pay agreement in This notice will remain current for 30 or the second sec	this letter. urns as required, or you essments with the Divis place.	sion of Collections	
WHAT YOU NEED TO DO	 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. 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. 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 you. Agent: Bruce REV3968, Taxpayer Direct: 502-564-2038			