Organization ID # 04 State of origin KN Filing fee \$115.00	1			alth of Ke s, Secret	entucky tary of State	0417901.09 Michael G. Adams Kentucky Secretary of State	
Michael G. Adar Secretary of Sta P. O. Box 718 Frankfort, KY 40602 (502) 564-3490 http://www.sos.ky	ate 2-0718	•	einstatement Application and Reinstatement Annual Report For the year 2021			Received and Filed: 12/2/2021 7:20 AM Fee Receipt: \$115.00	
Exact organization nam KENTUCKY LIVE P. O. BOX 198 PARIS KY 40362	STOCK N	icipal office add IARKETING ASS		IC.	agent name/of on this form. \ modify the add filed. Once the statement of ch	office address and registered fice address cannot be changed When reinstating, you cannot resses until the reinstatement is reinstatement is filed, the hange can be filed online at <u>https:</u> <u>poviftsearch</u> or can be downloaded e.	
company's information here	SON SBURG F 20198 uded in a p	ROAD arent company's K	entucky tax re	turn as a disrega	rded entity or a subsidiar	ry, please provide the parent	
Principal Officers - Lis	t the name,	address and title of	all current office	rs. All organizations	must list at least one (1) off	icer, even in the case of a sole officer. icer serving as records custodian	
Treasurer		ROBERTSON					
Secretary		ROBERTSON		<u>, , , , , , , , , , , , , , , , , , , </u>			
President	JIM AK			_ '		······································	
		· .				· · · · · · · · · · · · · · · · · · ·	
Directors - Non-profit corports the principal office address.	prations must	t have at least three (3) directors. All o	directors of the non-	profit must be listed. If Not	specified, director addresses default to	
BANE ROBERTSON			· .	2			
DAVID HOLT					-		
KENT ROBERTSON		· · · · · · · · · · · · · · · · · · ·	а.			· · · · · · · · · · · · · · · · ·	
				<u></u>		<u>. </u>	
			es -	<u></u>	1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -		
					•		
The above entity was add 2021. The undersigned	ministrativ states that	ely dissolved on t the grounds for	October 18, dissolution e	2021 because either did not ex	the entity did not file its ist or have been elimi	s annual report for the year nated, and the entity's name	

satisfies the requirements of KRS 273.3181. 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 KENTUCKY LIVESTOCK MARKETING ASSOCIATION, 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.

Х, U.S.Kehn Tres Signature of officer Or chairman of the board (Required)

Title (Required)

11/23/21 Date (Required)



KENTUCKY LIVEST ASSOCIATION, INC P. O. BOX 198 PARIS KY 40362019		Notice Date: KY SoS Org. ID:	December 1, 2021 0417901				
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. You are registered with the Department of Revenue. An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing. 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	 If you are attempting to reinstate of this letter to the Kentucky Secret notice date above. If you are a for-profit corporation Secretary of State a letter of good s Unemployment Insurance. Their tele If you are a non-profit entity, plea tax returns with the Kentucky Attom requirements website is: http://ag.k charity/Pages/registration.aspx. 	ary of State within 3 , you will also need tanding from the Div phone number is 50 ase remember to file ney General. The ch	30 days of the to provide the <i>i</i> ision of 02-564-6835. a copy of your arity filing				
CONTACT INFORMATION	If you have any questions regarding this you. Agent: Bruce REV3968, Taxpayer Ser Direct: 502-564-2038		tact me. Thank				