Organization ID # 0850401 **Commonwealth of Kentucky** State of origin KY
Filing fee \$130.00 Alison Lundergan Grimes, Secretary of State Received and Filed

0850401.06 SosIntern **LRPF** 

Received and Filed: 2/21/2019 10:42 AM Fee Receipt: \$130.00

Alison Lundergan Grimes Secretary of State

## Reinstatement Application and

P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Annual Report For the years 2018 through 2019		RST
Exact limited liability company name and principal office address  MHG, LLC 413 TIMBERLAKE AVENUE ERLANGER KY 41018		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 <a href="mailto:app.sos.ky.gov/ftsearch">app.sos.ky.gov/ftsearch</a> or can be downloaded from our website.	
Registered Agent and Registered C Timothy Menoher 413 Timberlake Avenue Erlanger, KY 41018		FEIN (Optional)	
If the above company is included in a par company's information here (optional): FEIN:Name:	ent company's Kentucky tax return as a disreg	arde	
Members - List the name and address of th	e limited liability company's members. If not specified, ad	Idresses default to the LLC's principal office	address Member-managed
TIMOTHY MENOHER	,	Ž.,	
GENE HUGHES			
COREY GALLUS			
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The undersigned states that the grou	dissolved on October 16, 2018 because to nds for dissolution either did not exist or he sed is a check in the amount of \$130.00, pa	ave been eliminated, and the ent	ity's name satisfies the
Under penalty of perjury, the below si information pertaining to MHG, LLC to	igned hereby authorizes the Kentucky Dep to the Secretary of State, as required for rei	artment of Revenue to release a instatement pursuant to KRS 27	ny applicable tax 1B.14-220.
If not an officer of said entity, please	provide a Declaration of Power of Attorney	with the Reinstatement Applicat	tion.
x Pain Tally	Member	<del></del>	February 19, 2019
Signature of member or manager (Re	equired) Title (R	lequired)	Date (Required)

Website: www.revenue.kv.gov Phone: 502-564-8139 502-564-0058 Fax:

MHG, LLC 9812 WINDSOR WAY **FLORENCE KY 41042** 

Notice Date:

February 21, 2019

KY SoS Org. ID: 0850401

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: Bruce REV3968, Taxpayer Services Specialist I

Email: Bruce.Owens@ky.gov

Direct: 502-564-2038