Organization ID# 1003004 State of origin Filing fee \$175.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

1003004.06

Fee Receipt: \$175.00

Michael G. Adams **Kentucky Secretary of State** Received and Filed: 1/28/2022 2:00 PM

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 2018 through 2022

| Exact limited liability company name and principal office addre | SS |
|---|----|
|---|----|

TUCKER MCALPIN LLC 1490 W HIGHWAY 80

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

| SOMERSET KY 42503 | | | led. Once the reinstatement atement of change can be | • |
|--|---|--|--|----------------------|
| | | The State of the S | veb.sos.ky.gov\ftsearch or om our website. | r can be downloaded |
| Registered Agent and Registered Office Address | | | | |
| Tucker Mcalpin | | | | |
| 1490 W Highway 80 | | The state of the s | | |
| Somerset, KY 42503 | N. C. | 7 74- | | 4 |
| f the above company is included in a parent company's Ken | tucky tax return as a di | sregard | Control Control Control (Control Control Contr | ent |
| company's information here (optional). | | 19 | | |
| FEIN: Name: | | | | |
| Managers - List the name And address of the limited liability o | ompany's managers. If no | t specified, addresse | s default to the LLC's princ | ipal office address. |
| Tucker MSAIA | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | -1-1-40 0040 | | a versa a | |
| The above entity was administratively dissolved on O | | | | |
| 2018. The undersigned states that the grounds for dis satisfies the requirements of KRS 275.295. Enclosed | | | | |
| Under penalty of perjury, the below signed hereby aut | horizes the Kentucky | / Department of I | Revenue to release a | ny applicable tax |

information pertaining to Tucker Mcalpin LLC to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

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

Signature of member Or manager (Required)



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

Tucker Mcalpin LLC 1490 W Highway 80 Somerset KY 42503

Notice Date:

January 26, 2022

KY SoS Org. ID:

1003004

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.
- 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: Megan REVY099, Taxpayer Services Specialist II

Email: MeganD.Roberts@ky.gov

Direct: 502-564-7310