Organization ID # 0898109 State of origin

Commonwealth of Kentucky Filing fee \$130.00 Alison Lundergan Grimes, Secretary of St

0898109.09

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Alison Lundergan Grimes **Kentucky Secretary of State** 

Received and Filed: 9/17/2019 2:49 PM Fee Receipt: \$130.00

Alison Lundergan Grimes 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 2015 through 2016

K31

Exact organization name and principal office address

RICE RESTAURANT, INC. 13823 ENGLISH VILLA DRIVE **LOUISVILLE KY 40245** 

Registered Agent and Registered Office Address

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.

FFIN (Ontional)

LAN ZHAN	G				
	SLISH VILLA DRIVE				
	E, KY 40245			.5 _	
if the above company i company's information		company's Kentucky to	ax return as a disregar	de	ır
FEIN:	Name:				
					in the case of a sole officer. If not
	default to the principal offi	ce address. Corporations ar	re required to list a Secretar	y or other officer serving as re	cords custodian
President		-LAN	$\frac{2ha}{}$	ha	
Vice-President				"	
Secretary		LAN		2hana	
Treasurer		LAN	2/	ana J	
2015. The undersigr satisfies the requirer	ned states that the g ments of KRS 271B.	rounds for dissolution 14-210. Enclosed is	n either did not exist a check in the amou	or have been eliminatent of \$130.0 <mark>0</mark> , payable	es annual report for the year ed, and the entity's name to Kentucky State Treasurer.
Under penalty of per information pertaining 271B.14-220.	jury, the below sign ng to RICE RESTAU	ed hereby authorizes RANT, INC. to the So	s the Kentucky Depar ecretary of State, as	tment of Revenue to re required for reinstatem	elease any applicable tax lent pursuant to KRS
X XG	or chairman of the board		f Power of Attorney w	with the Reinstatement	Application.  Date (Required)

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

RICE RESTAURANT, INC. **13823 ENGLISH VILLA DRIVE LOUISVILLE KY 40245** 

Notice Date:

September 17, 2019

KY SoS Org. ID: 0898109

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: Cory REV4079, Revenue Auditor I

Email: Cory.Johnson@ky.gov Direct: (502) 564-7370



## COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 https://kewes.ky.gov UITax@KY.GOV

Date: 09/16/2019	
RICE RESTAURANT, INC.	
Dear Sir/Madam:	
	KRS 14A.7-030(1)(f) CERTIFICATE

The Office of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Tara Welch
Office of Unemployment Insurance
PO Box 948
Frankfort, Kentucky 40602-0948
Phono: (502) 564, 2272

Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0898109

