Organization ID # 1108709 State of origin KY Filing fee \$115.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

1108709.06

Fee Receipt: \$115.00

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Michael G. Adams Kentucky Secretary of State Received and Filed: 11/1/2023 1:00 PM

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Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Tall Mary Mills of the State of

Reinstatement Application and Reinstatement Annual Report For the year 2023

Exact limited liability company name and principal office address
LAVENDER SPRINGS ALPACA LLC
158 L CONLEY RD
OIL SPRINGS KY 41238

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 https://web.sos.ky.gov/bussearchnprofile/search or can be downloaded from our website.

		* : ·	· · · · · · · · · · · · · · · · · · ·	can be downloaded from	n our website.
Registered Agent and Registered Office A	Address	راسي			
Ashlee E Osoway	· · ·				
158 L Conley Rd					
Oil Springs, KY 41238	÷		•		,
If the above company is included in a parent con	npany's Kentucky tax	return as a d	isregarde e emily	or a oubojulary, pioc	aso provide ino par ent
company's information here (optional):					
FEIN: Name:		·			
Manahana					
Members - List the name And address of the limi managed LLCs are not required to list their members.	ited liability company's n	nembers. If not	specified, addresse	es default to the LLC's	principal office address Member
managed LLOS are not required to list triell members.		.		 	<u> </u>
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	· ·	·- · · · · · ·		Sp. ,	* .
The above entity was administratively disso The undersigned states that the grounds fo the requirements of KRS 275.295. Enclose	or dissolution eithe	r did not exi	st or have been	eliminated, and t	he entity's name satisfies
Under penalty of perjury, the below signed information pertaining to Lavender Springs 271B.14-220.					
If not an offic∉r of said ∉ntity, please provide	e a Declaration of F	Power of Atto	rney with the R	einstatement App	lication.
Signature of member Ormanager (Required)	7	gisteru	Dan Title (Required)		1077-2023 Date (Required)
. (J	V j			

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

Lavender Springs Alpaca LLC 158 L Conley Rd Oil Springs KY, 41238

Notice Date:

November 1, 2023

KY SoS Org. ID: 1108709

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: James REVE277, Taxpayer Services Specialist II

Email: James.Sutherland@ky.gov

Direct: 502-564-7359