Organization ID # 0525013 State of origin Filing fee \$115.00

Michael G. Adams

Secretary of State P. O. Box 718

Frankfort, KY 40602-0718

(502) 564-3490 http://www.sos.ky.gov

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0525013.06

dwilliams

Michael G. Adams

Kentucky Secretary of State Received and Filed: 11/9/2023 12:34 PM Fee Receipt: \$115.00

Reinstatement Application and Reinstatement Annual Report

For the year 2023

KJI

Exact limited liability company name and principal office address

AEB NO. 1, LLC 2006 STARMONT ROAD **LOUISVILLE KY 40207**

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.

Registered Agent and Registered Office Address

CHRISTOPHER H BEARD 3810 FLOWERING GROVE COURT 3810 FLOWERING GROVE COURT LOUISMILE KVADSA1

	mpany's Kentucky tax return as a disregarded entity or a subsidiary, please provide the parent
company's information here (optional): -EIN: Name:	
ARTHUR SWAIN BEARD	nited liability company's managers. If not specified, addresses default to the LLC's principal office address. 2006 STARMONT ROAD
	LOUGUITE MY 40227
	· · · · · · · · · · · · · · · · · · ·
The above entity was administratively diss	olved on October 4, 2023 because the entity did not file its annual report for the year 2023.
The undersigned states that the grounds f	or dissolution either did not exist or have been eliminated, and the entity's name satisfies ed is a check in the amount of \$115.00, payable to Kentucky State Treasurer.
Jnder penalty of perjury, the below signed	hereby authorizes the Kentucky Department of Revenue to release any applicable tax of the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.
	e a Declaration of Power of Attorney with the Reinstatement Application. 1 12023
x (her ATT)	MEMBER AZENT 10 30 Title (Required) Date (Required)
Signature of member Or manager (Required) Title (Required) Date (Required)
christ-pher H 131	EARL) Chairman of B-ARD
•	•

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

Fax: 502-564-0058

AEB NO. 1, LLC 2006 STARMONT ROAD LOUISVILLE KY, 40207

Notice Date:

November 9, 2023

KY SoS Org. ID: 0525013

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: Dottye REV3769, Taxpayer Specialist II

Email: Dottye.Roberts@ky.gov

Direct: 502-564-0102