Organization ID # 0660914 State of origin Filing fee \$130.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

Michael G. Adams **Kentucky Secretary of State** Received and Filed: 8/12/2021 1:54 PM Fee Receipt: \$130.00

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

COVINGTON KY 41011

Signature of member Or manager (Required)

Reinstatement Application and Reinstatement Annual Report For the years 2020 through 2021

Date (Required)

Exact limited liability company name and principal office address EASTSIDE REVITALIZATION II ASSOCIATES, LLC **50 E. RIVERCENTER BLVD. SUITE 1400**

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\ftsearch or can be downloaded

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Deviatered Agent and Degistered Office Address					
Registered Agent and Registered Office Address					7
STEPHEN C. SMITH					 •
6101 E. CABIN CREEK DRIVE	`,		**		1
COLD SPRING, KY 41076					9
If the above company is included in a parent company's K	entucky tax r	eturn as a dis	sregard		ent
company's information here (optional):		-			
FEIN: Name:	•		<u> </u>		•
0.10				i::::	
Members - List the name And address of the limited liability	company's m	embers. If not	specified, addres	ses default to the LLC's principal of	fice address Membe
managed LLCs are not required to list their members.		· ::			*
ARTHUR J. RECKMAN		•			
STEPHEN C. SMITH	115				
	•	* * * * * * *		and the second s	
				**************************************	٠.
n i i i i	· ·				
The above entity was administratively dissolved on The undersigned states that the grounds for dissol the requirements of KRS 275.295. Enclosed is a ch	ution either	did not exis	t or have bee	n eliminated, and the entity	s name satisfies
Under penalty of perjury, the below signed hereby a information pertaining to EASTSIDE REVITALIZATIO pursuant to KRS 271B.14-220.					
If not an officer of saidlentity, please provide a Declar	aration of P	ower of Atto	rney with the	Reinstatement Application.	
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Title (Required)



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

Fax: 502-564-0058

EASTSIDE REVITALIZATION II ASSOCIATES, LLC

Notice Date: KY SoS Org. ID: August 12, 2021

0660914

1826 Race Street Cincinnati, OH 45202

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: Bruce REV3968, Taxpayer Services Specialist II

Direct: 502-564-2038