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Michael G. Adams
Kentucky Secretary of State
Received and Filed:

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Organization ID # 0883018 State of origin KY Filing fee \$175.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0883018

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 2016 through 2020

RST

Exact limited liability company name and principal office address FARMER'S SPRAY ON INSULATION, LLC PO BOX 15 CECILIA KY 42724	The principal of name/office ad form. When rei addresses until reinstatement is ned, me statement or change caffed online at app. age. It now/fisearch or can be downloaded from our website.
Designation Agent and Posistered Office Address	FEIN (Ontional)

Vadiateran ydent gun vedratelan Omice yddiaas	rem (opnoner)
RICKY L. FARMER	
8786 ST. JOHN RD.	
CECILIA, KY 42724	
If the above company is included in a parent company's Kentucky tax return as a disregarded	l entity or a subsidiary, please provide the parent
company's information here (optional):	
FEIN: Name:	
Managers - List the name And address of the limited liability company's managers, if not specified, address	ses default to the LLC's principal office address.
RICKY L FARMER	
	

The above entity was administratively dissolved on October 1, 2016 because the entity did not file its annual report for the year 2016. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 275.295. Enclosed is a check in the amount of \$175.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to FARMER'S SPRAY ON INSULATION, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an office of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application,

it not an onicarior sale entity, please provide a Decia	itegoti of Lowel of Vifornes and rise (sensiatement whi	ACAUCH.
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	de	5620
Signature of member Or manager (Required)	Tilla (Required)≱	Dale (Required)

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

May 6, 2020

0883018

502-564-0058 Fax:

Notice Date:

KY SoS Org. ID:

FARMER'S SPRAY ON INSULATION, LLC **PO BOX 15 CECILIA KY 42724**

Letter of Good Standing Request - Approved

SUMMARY

RE:

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: Bruce REV3968, Taxpayer Services Specialist II

Email: Bruce.Owens@ky.gov

Direct: 502-564-2038