Organization ID # 0898420 State of origin KY Filing fee \$145.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0898420.06

Michael G. Adams **Kentucky Secretary of State** Received and Filed: 4/7/2021 7:44 AM Fee Receipt: \$145.00

| | |

Date (Required)

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

Signature of member Or manager (Required)

Reinstatement Application and **Reinstatement Annual Report**

For the years 2019 through 2021

Exact limited liability company name and principal office address MCV LLC 8755 IRVINE ROAD WINCHESTER KY 40391	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.
Registered Agent and Registered Office Address	FEIN (Optional)
MINDA G. PEARSON 8755 IRVINE ROAD WINCHESTER, KY 40391	
If the above company is included in a parent company's Kentucky tax return as a disregard company's information here (optional): FEIN: Name: Name:	ent
Managers - List the name And address of the limited liability company's managers. If not specified, addre	esses default to the LLC's principal office address.
MINDA PEARSON	
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The above entity was administratively dissolved on October 16, 2019 because the entity that the grounds for dissolution either did not exist or have requirements of KRS 275.295. Enclosed is a check in the amount of \$145.00, payal	been eliminated, and the entity's name satisfies the
Under penalty of perjury, the below signed hereby authorizes the Kentucky Department information pertaining to MCV LLC to the Secretary of State, as required for reinstate	nent of Revenue to release any applicable tax tement pursuant to KRS 271B.14-220.
If not an officer of said entity/please provide a Declaration of Power of Attorney with	n the Reinstatement Application.
x Kindadisersa manager	Spiel 2'21

Title (Required)

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

MCV LLC 8755 IRVINE ROAD WINCHESTER KY 40391 Notice Date: April 6, 2021 KY SoS Org. ID: 0898420

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.

An authorized person requested this letter.

3. You filed income and LLE tax returns as required, or you are exempt from

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
 - 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