

Organization ID # 0297521
State of origin KY
Filing fee \$130.00

Commonwealth of Kentucky

Alison Lundergan Grimes, Secretary of State

0297521.08 BALIMONOS PRPF
Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
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Fee Receipt: \$130.00

Alison Lundergan Grimes
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 2012 through 2013



Exact limited partnership name and if domestic, designated address or, if foreign, principal office address

CITY VIEW APARTMENTS, LTD.
NORTH & SCHOOL STREET
CARLISLE KY 40311

BY: _____
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

E. S. ROSE
ROUTE #5
OWINGTON, KY 40356



General partners - List the name and address of the limited partnership's general partners. If not specified, addresses default to the partnership's designated office or principal office address.

James C. Rose 1729 S. Limestone Lexington Ky 40503

The above entity was administratively dissolved on September 11, 2012 because the entity did not file its annual report for the year 2012. 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 362. Enclosed is a check in the amount of \$130.00, 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 CITY VIEW APARTMENTS, LTD. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

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

X James C. Rose GP 7/31/13
Signature of partner (Required) Title (Required) Date (Required)



THOMAS B. MILLER
Commissioner

**FINANCE AND ADMINISTRATION CABINET
DEPARTMENT OF REVENUE
OFFICE OF INCOME TAXATION**

ELYSE WEIGEL
Deputy Commissioner

BOB BROOKS
Executive Director

November 21, 2013

**CITY VIEW APARTMENTS, LTD.
NORTH & SCHOOL STREET
CARLISLE KY 40311**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **CITY VIEW APARTMENTS, LTD.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2012, and has paid the taxes shown to be due or assessed as of the date of this letter. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the limited partnership. This letter is valid for 30 days from the date of this letter.

Sincerely,

Darrell Young Revenue Auditor I
Division of Corporation Tax
501 High Street, Mail Sta. 69
Frankfort, KY 40601
502-564-2127
FAX# 502-564-3392

Kentucky Secretary of State organization number 0297521