Organization ID # 0810923 State of origin KY	of origin KY Commonwealth of Reflucky		0810923.06 Alison Lundergan Gr	
Alison Lundergan Grimes	n Lundergan Grimes, Sec		Kentucky Secretary Received and Filed: 12/4/2014 1:06 PM Fee Receipt: \$115.00	
Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Annu	Reinstatement Application and Reinstatement Annual Report For the year 2014		
Exact limited liability company name and principal office address LERELEN LLC 2510 RIVER OAKS DR. LOUISVILLE KY 40206		The principal office addre name/office address cann form. When reinstating, you addresses until the reinstata reinstatement is filed, the st filed online at <u>app.sce.ky.g</u> downloaded from our websi	tot be changed on this u cannot modify the ement is filed. Once the attement of change can be <u>ov/ftseeuch</u> or can be	_
Registered Agent and Registere BUSINESS FILINGS INC 306 W. MAIN ST STE 512 FRANKFORT, KY 40601				
Members - List the name and address of the LLCs are not required to list their members.	he limited liability company's members. If not specified, addre	sses default to the LLC's principal offic	e address Member-managed	_
KEELY MARIE BRANDON JOVAN DAVID REBOLLEDO-ME	NDEZ			-

The above entity was administratively dissolved on September 30, 2014 because the entity did not file its annual report for the year 2014. 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 \$115.00, 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 LERELEN LLC 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	(ED ((huf Execution Office))	10.29.2014
Signature of member or manager (Required)	Title (Required)	Date (Required)
\sim		



THOMAS B. MILLER Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

BOB BROOKS Executive Director

December 4, 2014

LERELEN LLC 140 E MAPLE ST GLENDALE, KY. 42740

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **LERELEN LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2013, 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 liability company. This letter is valid for 30 days from the date of this letter.

Sincerely,

Darrell REVX023, Revenue Auditor II 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 0810923

