Organization ID # 0921023 State of origin

Commonwealth of Kentucky Filing fee \$130.00 Alison Lundergan Grimes, Secretary of S

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Alison Lundergan Grimes

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 2016 through 2017

Kentucky Secretary of State Received and Filed: 2/8/2017 12:43 PM Fee Receipt: \$130.00

Exact limited liability company name and principal office address STEVENS TOWING AND RECOVERY LLC

8221 S. US HIGHWAY 23 **CORBIN KY 40701**

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 Ad	ldress	
ROSCOE STEVEN NOE		
8221 S. US HIGHWAY 23		
CORBIN, KY 40701		
If the above company is included in a parent company company's information here (optional): FEIN:	's Kentucky tax return as a disregard	e ht
Members - List the name and address of the limited liability LLCs are not required to list their members.	company's members. If not specified, addres	ses default to the LLC's principal office address Member-managed
STEVEN NOC	8211 South US	25 Corbin KY 40761
	8. 4	

The above entity was administratively dissolved on The undersigned states that the grounds for dissolved in requirements of KRS 275.295. Enclosed is a che	olution either did not exist or have	ntity did not file its annual report for the year 2016. been eliminated, and the entity's name satisfies the ble to Kentucky State Treasurer.
Under penalty of perjury, the below signed hereb information pertaining to STEVENS TOWING AN to KRS 271B.14-220.	y authorizes the Kentucky Departr D RECOVERY LLC to the Secreta	ment of Revenue to release any applicable tax ary of State, as required for reinstatement pursuant
If not an officer of said entity, please provide a De	eclaration of Power of Attorney wit	h the Reinstatement Application.
X Ser	Owner	1-29-17
Signature of member or manager (Required)	Title (Requi	red) Date (Required)



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

February 8, 2017

STEVENS TOWING AND RECOVERY LLC 8221 S. US HIGHWAY 23 CORBIN KY 40701

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **STEVENS TOWING AND RECOVERY LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2015, 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,

Ramon REV4636, Taxpayer Services Specialist I Pass Through Entity Branch 501 High Street, Mail Station 69 Frankfort, KY 40601 Phone: (502) 564-2169

Fax: (502) 564-216

Kentucky Secretary of State organization number 0921023

