Organization ID # 0989324 State of origin KY Filing fee \$145.00

## Commonwealth of Kentucky Michael G. Adams, Secretary of State

0989324.06

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Michael G. Adams Kentucky Secretary of State Received and Filed: 7/15/2020 10:41 AM

Fee Receipt: \$145.00

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 2018 through 2020

RST

Exact limited liability company name and principal office address

HOUSE OF SPEARS, LLC 808 NORTH LIMESTONE NUMBER 2 LEXINGTON KY 40505

Registered Agent and Registered Office Address

MMLK, INC. 201 EAST MAIN STREET SUITE 900 LEXINGTON. KY 40507 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 <a href="mailto:app.sos.ky.gov/ftsearch">app.sos.ky.gov/ftsearch</a> or can be downloaded from our website.

The principal office address and registered agent

LEXINGTON, KY 40	/
	a parent company's Kentucky tax return as a disregarded entity or a subsidiary, please provide the parent
company's information here (op	ai):
FEIN: Name:	
Members - List the name And ac LLCs are not required to list their mem	ess of the limited liability company's members. If not specified, addresses default to the LLC's principal office address Member-managed
	213 North Limestone, Lexington, Kentucky 40507

The above entity was administratively dissolved on October 16, 2018 because the entity did not file its annual report for the year 2018. 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 \$145.00, 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 HOUSE OF SPEARS, 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 Soft	Member OWNER	7.7.2020
Signature of member Or manager (Required)	Title (Required)	Date (Required)

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

HOUSE OF SPEARS, LLC 808 NORTH LIMESTONE **NUMBER 2 LEXINGTON KY 40505** 

Notice Date: July 15, 2020 KY SoS Org. ID: 0989324

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.

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: Megan REVY099, Taxpayer Services Specialist I

Email: MeganD.Roberts@ky.gov

Direct: 502-564-7310