Organization ID # 0665726 Commonwealth of Kentucky State of origin KY Filing fee \$145.00 Alison Lundergan Grimes, Secretary of Sta		Received and Filed: 7/10/2015 8:11 AM	
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 2013 through 2015		Fee Receipt: \$145.00
Exact limited liability company name and principal office address LMS TRAVEL, LLC 7611 HORNBECK FARM ROAD LOUISVILLE KY 40291		name/office addres form. When reinsta addresses until the reinstatement is file	e address and registered agent ss cannot be changed on this ting, you cannot modify the reinstatement is filed. Once the d, the statement of change can be <u>os,ky.gov/ftsearch</u> or can be ur website.
<u>Registered Agent and Registere</u> LAURA M. STEWART 7611 HORNBECK FARM LOUISVILLE, KY 40291			
<b>Members</b> - List the name and address of t LLCs are not required to list their members.	he limited liability company's members. If not specified, addr	esses default to the LLC's princ	ipal office address Member-managed
LAURA M STEWART	<u> </u>	FAKM RD KV 40a91	· · · · · · · · · · · · · · · · · · ·

The above entity was administratively dissolved on September 28, 2013 because the entity did not file its annual report for the year 2013. 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 LMS TRAVEL, 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.

Х 1172 Δ 011 nΛ MEMBER Signature of member or manager (Required) tle (Required)

M



THOMAS B. MILLER Commissioner

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

ELYSE WEIGEL **Deputy Commissioner** 

**BOB BROOKS Executive Director** 

July 9, 2015

## LMS TRAVEL, LLC 7611 HORNBECK FARM ROAD **LOUISVILLE KY 40291**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate LMS TRAVEL, LLC has filed Kentucky Income Tax Returns through the tax year ended 12/31/2014, 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,

Lamarr REV1367, Revenue Auditor II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7315 FAX# 502-564-0058

Kentucky Secretary of State organization number 0665726

