Organization ID # 0970227 Commonwealth of Kentucky
State of origin KY
Filling fee \$ 130,000 Alison Lundergan Grimes, Secretary of S

0970227.06

dwilliams LRPF

Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 3/18/2019 12:06 PM

Fee Receipt: \$130.00

K5

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 2018 through 2019

Exact limited liability company name and principal office address

CMW PLUMBING LLC 461 W MAIN ST AUBURN KY 42206 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.

<u>Registered Agent and Registered Office Ac</u>	<u>ldress</u>	EE .	N (Ontional)	
Greg Coleman				
361 Howlett Rd				
Auburn, KY 42206	to i est elle littli terresident literation i literature. Polici i delle delle literature literature en la company delle literature en la company delle literature en la			
f the above company is included in a parent comp	any's Kentucky tax return as a	disregarde		ent
company's information here (optional): -EIN: Name:				
LIIVIVAING				
Members - List the name and address of the limited lia	ability company's members. If not spec	ified, addresses default to t	he LLC's principal office addre	ss Member-managed
GREG KEITH COLEMAN				
JOHN DAVID MORGAN				
EDWARD HARLAND WARD III		Jacob Military		
The above entity was administratively dissolve The undersigned states that the grounds for c requirements of KRS 275.295. Enclosed is a	lissolution either did not exis	t or have been elimi	nated, and the entity's	for the year 2018. name satisfies the
Under penalty of perjury, the below signed he nformation pertaining to CMW PLUMBING LI				
f not an officer of said entity, please/provide	a Declaration of Power of At	orney with the Reins	statement Application.	
X In the	owner		2,	115/19
Signature of member or manager (Required)		Title (Required)		Date (Required)

Website: www.revenue.kv.gov Phone: 502-564-8139

March 18, 2019

0970227

502-564-0058 Fax:

Notice Date:

KY SoS Org. ID:

CMW PLUMBING LLC 461 W MAIN ST **AUBURN KY 42206**

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: Priya REV3969, Revenue Auditor I Email: priya.somasundaram@ky.gov

Direct: (502) 564-7296

Website: www.revenue.kv.gov Phone: 502-564-8139

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