ganization ID # 1298727 ate of origin KY ing fee \$115.00 Mi	Commonwealth of Kentucky chael G. Adams, Secretary of S	t KY Secretary Received and	Michael G. Adams KY Secretary of State Received and Filed	
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Applicatio Reinstatement Annual Re For the year 2024	Fee receip N anu	4 12:13:52 PM t: \$115.00 <b>RST</b>	
	ROAD stered Office Address	gent name/office a on this form. When nodify the addresse	address and registere ddress cannot be chan reinstating, you cannot s until the reinstatement atement is filed, the will be filed.	

Managers - List the name And address of the limited liability company's managers. If not specified, addresses default to the LLC's principal office addr

JULIE DALE WALTERS

665 TURNER FORD ROAD

County: Business size: Business type:

SIMPSON Small Miscellaneous Services

The above entity was administratively dissolved on 10/12/2024 because the entity did not file its annual report for the year 2024. 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 14A.3-010; and that the entity has taken no steps to wind up and liquidate its business and affairs.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to Julie Walters Picture This Travel Limited Liability Company to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Julie Walters Title: Owner 11/14/2024



	Julie Walters Picture Company 665 Turner Ford Roa Franklin KY, 42134		s Travel Limited Liability	Notice Date: KY SoS Org. ID:	November 14, 2024 1298727	
RE:		Letter of Good Standing Request - Approved				
SUMM	IARY	You requested a letter of good standing, and your entity is in <b>good standing</b> with the Department of Revenue.				
OUR I	DETERMINATION	<ol> <li>We verified the following information.</li> <li>You are registered with the Department of Revenue.</li> <li>An authorized person requested this letter.</li> <li>You filed income and LLE tax returns as required, or you are exempt from filing.</li> <li>You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.</li> <li>This notice will remain current for 30 days from the notice date above.</li> </ol>				
WHAT	T YOU NEED TO DO	1. 2. 3.	<ul> <li>of this letter to the Kentucky Secretary of State within 30 days of the notice date above.</li> <li>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.</li> </ul>			
AGEN INFOF	T RMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Angie Morris Direct: 502-564-7327				