Organization ID # 0526829

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

0526829.06

amcray LRPF

Alison Lundergan Grimes

Received and Filed: 3/7/2017 11:12 AM Fee Receipt: \$130.00

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

RST

Exact limited liability company name and principal office address A A PORTABLE SANITATION, LLC 2629 STONEMILL DR. **ELIZABETHTOWN KY 42701**

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 Address		FEW (O-4'1)	
MANFREDO QUIROS	_		
2629 STONEMILL DR.			
ELIZABETHTOWN, KY 42701			
If the above company is included in a parent company's I	Kentucky tax return as a disregarded		
company's information here (optional):	-		
FEIN: Name:		_	
Members - List the name and address of the limited liability cor	mnanu's mambare if not snarified addresses de	efault to the LLC's principal office	andress Member-managed
LLCs are not required to list their members.	impany a membera. It not specified, addresses de	sauk to the EEO a principal office	address., Wember-managed
MANFREDO QUIROS			
CHERYL QUIROS			
The above entity was administratively dissolved on	October 1, 2016 because the entity	did not file its annual rep	ort for the year 2016.
The undersigned states that the grounds for dissolu			
requirements of KRS 275.295. Enclosed is a check			
Under penalty of perjury, the below signed hereby a	outhorizes the Kentucky Department	of Revenue to release a	ny annlicable tay
information pertaining to A PORTABLE SANITATI	ION III C to the Secretary of State:	as required for reinstaten	nent nursuant to KRS
27.18. 14-220.	1014, EEO to the occidenty of otate, t	20 required for remotators	none parodant to revo
ff not an office of saip entity please provide a Decl	aration of Power of Attorney with the	Reinstatement Applicat	ion.
X (\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Managing Memb	w	3-2-2017
✓Signature of member or manager (Required)	// //Title (Required)		Date (Required)



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

March 6, 2017

A A PORTABLE SANITATION, LLC 2629 STONEMILL DR. ELIZABETHTOWN KY 42701

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **A A PORTABLE SANITATION, 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,

Rada REV6015, Taxpayer Services Specialist II Pass Through Entity Tax Branch 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-7336 FAX# 502-564-3392

Kentucky Secretary of State organization number 0526829

