Organization ID # 0901329 State of origin KY Filing fee \$115.00 Alison	Commonwealth of Kentuck Lundergan Grimes, Secreta	Alison Lundergan Grimes Kentucky Secretary of State Received and Filed:
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 year 2019	
Exact limited liability company nan ANCHORAGE VILLAGE, LI P.O. BOX 472 HARRODS CREEK KY 400	27	The principal office address and registered agent name/office address cannot be changed on this orm. When reinstating, you cannot modify the iddresses until the reinstatement is filed. Once the einstatement is filed, the statement of change can be ided online at <u>app.sos.ky.gov/ftsearch</u> or can be lownloaded from our website.
Registered Agent and Registered C EDLG Service Company, LL 3950 Westport Road Louisville, KY 40207 If the above company is included in a par company's information here (optional): FEIN: Name:	JIIICE AUUIESS	it
<b>Members</b> - List the name And address of the LLCs are not required to list their members.	ne limited liability company's members. If not specified, addresses defau	t to the LLC's principal office address Member-managed
JASON BECKER		
DENNIS B. BECKER	/ Carlos Dec.	
HUNTER JACOBS		
JACK PARE JACOBS		
JUSTIN PHELPS The above entity was administratively The undersigned states that the grou	y dissolved on October 16, 2019 because the entity di inds for dissolution either did not exist or have been el	d not file its annual report for the year 2019. iminated, and the entity's name satisfies the

requirements of KRS 275.295. Enclosed is a check in the amount of \$115.00, 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 ANCHORAGE VILLAGE, 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.

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Х 2 Manag Signature of member Or manager (Required) ate



ANCHORAGE VILLAGE, LLC P.O. Box 472 Harrods Creek KY 40027 Notice Date: January 2, 2020 KY SoS Org. ID: 0901329

RE:	Letter of Good Standing Request - Approved You requested a letter of good standing, and your entity is in <b>good</b> <b>standing</b> with the Department of Revenue.	
SUMMARY		
OUR DETERMINATION	We verified the following information.	
	<ol> <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> </ol>	
	This notice will remain current for 30 days from the notice date above.	
WHAT YOU NEED TO DO	<ol> <li>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.</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> <li>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.</li> </ol>	
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Bruce REV3968, Taxpayer Services Specialist II Email: Bruce.Owens@ky.gov Direct: 502-564-2038	