Organization ID # 0758635 State of origin KY Filing fee \$160.00 Mic Michael G. Adams	Commonwealth of Kentuck chael G. Adams, Secretary of	Ky Stat Kent Recu 2/22	58635.06 nael G. Adams tucky Secretary of s eived and Filed: 2/2021 12:09 PM Receipt: \$160.00	dwilliams LRPF State
Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Application Reinstatement Annual Re For the years 2018 through 20	eport	R	ST
Exact limited liability company nam HHM ENTERPRISES, LLC 1098 STONEY POINT RD PARIS KY 40361	n fi a fi fi fi fi fi fi fi	ame/office addres orm. When reinstal addresses until the r einstatement is filed	e address and registered ss cannot be changed or ting, you cannot modify th reinstatement is filed. Onc d, the statement of change <u>os.ky.gov/ftsearch</u> or can ar website.	n this le se the e can be
Registered Agent and Registered O BART MCFARLAND 1098 STONEY POINT RD PARIS, KY 40361 If the above company is included in a part company's information here (optional): FEIN:Name;	ffice Address ent company's Kentucky tax return as a disrega			arent
Members - List the name And address of th LLCs are not required to list their members. DR. BART MCFARLAND PAMELA MCFARLAND	e limited liability company's members. If not specified, addresses defaul	t to the LLC's princi	ipal office address Memb	ber-managed
The above entity was administratively	dissolved on October 16, 2018 because the entity di			year 2018.

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 \$160.00, 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 HHM ENTERPRISES, 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.

8 R NE Title (Required) Date (Required) Signature of member Or manager (Required)



HHM ENTERPRISES, LLC
1098 STONEY POINT RD
PARIS KY 40361

Notice Date:	February 18, 2021
KY SoS Org. ID:	0758635

RE:	Letter of Good Standing Request - Approved You requested a letter of good standing, and your entity is in good standing with the Department of Revenue.	
SUMMARY		
OUR DETERMINATION	 We verified the following information. You are registered with the Department of Revenue. An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing. 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	 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. 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. 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: Tonja REV3883, Taxpayer Services Specialist II Email: Tonja.Lilly@ky.gov Direct: 502-564-7289	