	Commonwealth of Kentucky ael G. Adams, Secretary of St	Received an	r <b>y of State</b> d Filed
Michael G. Adams 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 2023 through 202	Fee recei anu port	port RST
<u>xact limited liability company</u> IMMUNITY INSURANCE, 359 CURTIN DR LEXINGTON KY 40503	LLC ag	ent name/office this form. When odify the address	e address and registe address cannot be ch n reinstating, you canno es until the reinstateme tatement is filed, the e will be filed.
egistered Agent and Register MATTHEW SIMPSON 359 CURTIN DR Lexington, KY 40503			
County: Business size:	Fayette Small		

The above entity was administratively dissolved on 10/4/2023 because the entity did not file its annual report for the year 2023. 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 IMMUNITY INSURANCE, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Matthew Simpson Title: owner 1/10/2024



<b>IMMUNITY INSURANCE, LLC</b>
110 PENMOKEN
LEXINGTON KY, 40503

Notice Date:	January 10, 2024
KY SoS Org. ID:	1212036

RE:	Letter of Good Standing Request - Approved
SUMMARY	You requested a letter of good standing, and your entity is in <b>good standing</b> with the Department of Revenue.
OUR 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 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: Joshua REV4558, Revenue Auditor I Email: Joshua.Pickard@ky.gov Direct: 502-564-0929