Organization ID # 0964542 Commonwealth of Kentucky State of origin KY
Filing fee \$130.00 Alison Lundergan Grimes, Secretary of Sta

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Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 1/17/2018 1:25 PM Fee Receipt: \$130.00

RST

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 2017 through 2018

Exact limited liability company name and principal office address
NEW HOBBY BOX, LLC
414 BAXTER AVE. SUITE 108
LOUISVILLE KY 40204

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.kv.gov/ftsearch or can be downloaded from our website.

LOUISVILLE KY 40204	r f	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 UNITED STATES CORPORATION AGENTS 9900 CORPORATE CAMPUS DRIVE, SUIT LOUISVILLE, KY 40223 If the above company is included in a parent company's Ke company's information here (optional): FEIN: Name:	E 3000 entucky tax return as a disregarded e	
Members - List the name and address of the limited liability company's members. If not specified, addresses default to the LLC's principal office address. Member-managed LLCs are not required to list their members. STEVE MARCIAN 1440 CHRUSH AVENUE, LOVES VELLE, KY, +OLO4		
The above entity was administratively dissolved on O The undersigned states that the grounds for dissoluti requirements of KRS 275.295. Enclosed is a check in	ion either did not exist or have been el	liminated, and the entity's name satisfies the
Under penalty of perjury, the below signed hereby au information pertaining to NEW HOBBY BOX, LLC to 271B.14-220.	ithorizes the Kentucky Department of the Secretary of State, as required for	Revenue to release any applicable tax reinstatement pursuant to KRS
If not an officer of said entity, please provide a Declar	ration of Power of Attorney with the Re	einstatement Application.
X (Sideafture of member or manager (Required)	CEO Title (Required)	OI/O5(IS
Signature of member of manager (Required)	ritie (Required)	Date (Required)

Website: www.revenue.kv.gov Phone: 502-564-8139

January 17, 2018

0964542

502-564-0058 Fax:

Notice Date:

KY SoS Org. ID:

NEW HOBBY BOX, LLC 414 BAXTER AVE. SUITE 300A **LOUISVILLE KY 40204**

Letter of Good Standing Request - Approved

SUMMARY

RE:

You requested a letter of good standing, and your entity is in **good standing** with the Department of Revenue.

OUR DETERMINATION

We verified the following information.

- 1. You are registered with the Department of Revenue.
- 2. An authorized person requested this letter.
- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 4. 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 1. 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.
 - 2. 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.
 - 3. 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: Ramon REV4636, Taxpayer Services Specialist I

Email: Ramon.Juanso@ky.gov

Direct: 502-564-2169