

Organization ID # 0777747
State of origin KY
Filing fee \$130.00

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

0777747.06 dcmish
LRPF
Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
3/7/2012 12:29 PM
Fee Receipt: \$130.00

Alison Lundergan Grimes
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 534-3490
<http://www.sos.ky.gov>

**Reinstatement Application and
Reinstatement Annual Report**
For the years 2011 through 2012

RST

Exact limited liability company name and principal office address

KMI, LLC
524 MAIN STREET
HAZARD KY 41702

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/research or can be downloaded from our website.

Registered Agent and Registered Office Address

LEON HOLLON
524 MAIN STREET
HAZARD, KY 41702

Managers - List the name and address of the limited liability company's managers. If not specified, addresses default to the LLC's principal office address.

Leon L. Hollon	524 Main Street, Hazard, KY 41701
Julie R. Akemon	524 Main Street, Hazard, KY 41701
Earl D. Clemons	105 Capital Hill Drive, Boonville, KY 41719
Ruth Brashear	524 Main Street, Hazard, KY 41701

The above entity was administratively dissolved on September 10, 2011 because the entity did not file its annual report for the year 2011. 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 \$130.00, 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 KMI, 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.

X

Signature of member or manager (Required)

MANAGER
Title (Required)

1/30/2012
Date (Required)



THOMAS B. MILLER
Commissioner

**FINANCE AND ADMINISTRATION CABINET
DEPARTMENT OF REVENUE
OFFICE OF INCOME TAXATION**

ELYSE WEIGEL
Deputy Commissioner

BOB BROOKS
Executive Director

March 7, 2012

KMI, LLC
524 Main Street
Hazard KY 41702

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **KMI, LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2010, 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,

Neelofar Moula, Revenue Auditor
Pass Through Entity Tax Branch
501 High Street, Mail Sta. 69
Frankfort, KY 40601
502-564-7335
FAX# 502-564-3392

Kentucky Secretary of State organization number 0777747