Organization ID # 0929247 State of origin

Commonwealth of Kentucky Filing fee \$130.00 Alison Lundergan Grimes, Secretary of Sta

0929247.06

mstratton **LRPF**

Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 11/9/2017 11:16 AM 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 2016 through 2017

Exact limited liability company name and principal office address

FAMILY FUMES, LLC

7424 OLD NORTH CHURCH ROAD **LOUISVILLE KY 40214**

Registered Agent and Registered Office Address

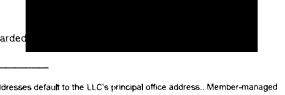
J. GREGORY TROUTMAN 312 SOUTH FOURTH STREET **SUITE 7000**

LOUISVILLE, KY 40202

If the above company is included in a parent company's Kentucky tax return as a disregarded company's information here (optional):

FEIN:

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/ftsearch or can be downloaded from our website.



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.

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The above entity was administratively dissolved on October 1, 2016 because the entity did not file its annual report for the year 2016. 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 FAMILY FUMES. 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	Auto LM	Owner	11-6-17
	Signature of member or manager (Required)	Title (Required)	Date (Required)



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

November 9, 2017

FAMILY FUMES, LLC 7424 OLD NORTH CHURCH ROAD LOUISVILLE KY 40214

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **FAMILY FUMES**, **LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2016, 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,

Ramon REV4636, Taxpayer Services Specialist I Pass Through Entity Branch 501 High Street, Mail Station 52 Frankfort, KY 40601 Phone# (502) 564-2169 Fax# (502) 564-0058

Kentucky Secretary of State organization number 0929247

