## Organization ID # 1188847 State of origin KY **Commonwealth of Kentucky** 1188847 Filing fee \$115 Michael G. Adams Michael G. Adams, Secretary of St **KY Secretary of State** Received and Filed 11/1/2023 12:17:15 PM Michael G. Adams Fee receipt: \$115.00 Reinstatement Application and Secretary of State RST P. O. Box 718 **Reinstatement Annual Report** Frankfort, KY 40602-0718 For the year 2023 (502) 564-3490 http://www.sos.ky.gov Exact limited liability company name and principal office address The principal office address and registered agent name/office address cannot be chang

## Exact limited liability company name and principal office address HUBBARDS LAWN CARE & HOME MANAGEMENT LIMITED LIABILITY COMPANY 2907 N KY 11 HEIDRICK KY 40949 Registered Agent and Registered Office Address

Jonathan Adam Hubbard 2907 N KY 11 Heidrick, KY 40949 The principal office address and registerec agent name/office address cannot be chan; on this form. When reinstating, you cannot modify the addresses until the reinstatement i filed. Once the reinstatement is filed, the statement of change will be filed.

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 Hubbards Lawn Care & Home Management Limited Liability Company to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Jonathan Hubbard Title: Owner 11/1/2023



Hubbards Lawn Care Liability Company 2907 N KY 11 Heidrick KY, 40949		Notice Date: KY SoS Org. ID:	November 1, 2023 1188847
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 Departme</li> <li>An authorized person requested this I</li> <li>You filed income and LLE tax returns filing.</li> <li>You have no outstanding tax assessm Collections or have a valid pay agreer</li> <li>This notice will remain current for 30 days</li> </ol>	etter. as required, or you nents with the Divis nent in place.	ion of
WHAT YOU NEED TO DO	<ol> <li>If you are attempting to reinstate y of this letter to the Kentucky Secretar notice date above.</li> <li>If you are a for-profit corporation, Secretary of State a letter of good sta Unemployment Insurance. Their telep</li> <li>If you are a non-profit entity, pleas tax returns with the Kentucky Attorne requirements website is: http://ag.ky. charity/Pages/registration.aspx.</li> </ol>	you will also need t anding from the Divis hone number is 502 e remember to file by General. The cha	o days of the to provide the sion of 2-564-6835. a copy of your arity filing
CONTACT INFORMATION	If you have any questions regarding this ryou. Agent: James REVE277, Taxpayer Serv Email: James.Sutherland@ky.gov Direct: 502-564-7359		act me. Thank