

Organization ID # 0746348

State of origin KY

Filing fee \$130.00

# Commonwealth of Kentucky

Elaine N. Walker, Secretary of State

0746348.06

mstratton

LRPF

Elaine N. Walker, Secretary of State

Received and Filed:

3/3/2011 2:04 PM

Fee Receipt: \$130.00

Elaine N. Walker  
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 2010 through 2011

RST

### Exact limited liability company name and principal office address

MCMACE, LLC  
512 MAIN STREET  
SHELBYVILLE KY 40065

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/fsearch](http://app.sos.ky.gov/fsearch) or can be downloaded from our website.

### Registered Agent and Registered Office Address

Matthew H. Chandler  
512 Main Street  
Shelbyville, KY 40065

**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.

Hart T. Megibben	909 Main Street, Shelbyville KY 40065
John C. Robinson	909 Main Street, Shelbyville KY 40065
Matthew H. Chandler	909 Main Street, Shelbyville KY 40065

The above entity was administratively dissolved on November 2, 2010 because the entity did not file its annual report for the year 2010. 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 MCMACE, 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 Matthew H. Chandler  
Signature of member or manager (Required)

Member  
Title (Required)

2/24/2011  
Date (Required)



**THOMAS B. MILLER**  
Commissioner

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

**ELYSE WEIGEL**  
Deputy Commissioner

**DON RICHARDSON**  
Executive Director

March 3, 2011

**MCMACE, LLC**  
**512 Main Street**  
**Shelbyville KY 40065**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **MCMACE, LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2009, 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,

Baba Ceesay, Revenue Auditor  
Pass Through Entity Tax Branch  
501 High Street, 6th Floor, Sta. 69  
Frankfort, KY 40601  
502-564-2039  
FAX# 502-564-3392

Kentucky Secretary of State organization number 0746348