Organization ID # 0568349 State of origin KY Filing fee \$160.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

For the years 2018 through 2021

Michael G. Adams

Kentucky Secretary of State Received and Filed: 12/28/2021 11:57 AM **Reinstatement Application and** Fee Receipt: \$160.00 **Reinstatement Annual Report**

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Exact limited liability company name and principal office address

LEXINGTON FARM LLC 2458 PALUMBO DRIVE **LEXINGTON KY 40509**

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

		\web	ment of change can be to sos.ky.gov\ftsearch or our website.	
Registered Agent and Registered Office Address				
JAMES D. FRALEY	* *.			Ì
2458 PALUMBO DRIVE				i
LEXINGTON, KY 40509				4
If the above company is included in a parent company's Ker	ntucky tax return as a	disregarde		ent
company's information here (optional):	,	•		
FEIN: Name:			* The second sec	.)
Members - List the name And address of the limited liability c managed LLCs are not required to list their members.	company's members. If no	ot specified, addresses de	fault to the LLC's princip	al office address Member-
JAMES C FRALEY			¥	
JAMES G GLASS			3 - 3	-
		* ,	s	
		in the state of th		1
	of a s			
The above entity was administratively dissolved on C 2018. The undersigned states that the grounds for d satisfies the requirements of KRS 275.295. Enclose	issolution either did	not exist or have be	en eliminated, and	the entity's name
Under penalty of perjury, the below signed hereby au information pertaining to LEXINGTON FARM LLC to t 271B.14-220. If not an officer of said entity please provide a Declar	he Secretary of State	e, as required for rei	nstatement pursua statement Application	on.
Signature of member or manager (Required)	. V. I. U.L	Title (Required)		Date (Required)
Signature of member of manager (Required)	A Way Vol.	inde (gedalled)	(Date (Required)

Website: www.revenue.ky.gov Phone: 502-564-8139 Fax: 502-564-0058

LEXINGTON FARM LLC 2458 PALUMBO DRIVE **LEXINGTON KY 40509**

Notice Date:

December 28, 2021

KY SoS Org. ID: 0568349

RE: Letter of Good Standing Request - Approved

SUMMARY

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: Bruce REV3968, Taxpayer Services Specialist II

Direct: 502-564-2038