anization ID # 0973749			UIII IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	
e of origin KY ng fee \$115 <b>Mic</b>	Commonwealth of Kentucky hael G. Adams, Secretary of S	Michael G. KY Secreta		
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Application Reinstatement Annual Re For the year 2018	Fee recei	— — — — — — — — — — — — — — — — — — —	
Exact limited liability compar WESLEY LAWN CARE, PO BOX 1387 LIBERTY KY 42539	LLC ar	gent name/office n this form. Whe nodify the address iled. Once the rein	ce address and register address cannot be cha in reinstating, you cannot ies until the reinstatement statement is filed, the	
Registered Agent and Register CALEB EDWARD ALEX PO BOX 1387 LIBERTY, KY 42539	red Office Address	tatement of chang	je wili de filea.	
	ss of the limited liability company's members. If not specified, address	es default to the l	LC's principal office add	
Member-managed LLCs are not required to li	st their members.			
Member-managed LLCs are not required to li CALEB WESLEY	PO BOX 1387 LIBERTY KY 42539			

The above entity was administratively dissolved on 10/16/2018 because the entity did not file its annual report for the year 2018. 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 WESLEY LAWN CARE, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Caleb Wesley Title: Owner 1/23/2024



WESLEY LAWN CARE, LLC Po Box 1387 LIBERTY KY, 42539 Notice Date: January 23, 2024 KY SoS Org. ID: 0973749

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 Department of Revenue.</li> <li>An authorized person requested this letter.</li> <li>You filed income and LLE tax returns as required, or you are exempt from filing.</li> <li>You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.</li> <li>This notice will remain current for 30 days from the notice date above.</li> </ol>
WHAT YOU NEED TO DO	<ol> <li>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.</li> <li>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.</li> <li>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.</li> </ol>
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Madison REV4528, Revenue Auditor II Email: madison.chism@ky.gov Direct: 502-564-3047