Organization ID # 0578752 State of origin Filing fee \$265.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

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dwilliams **LRPF**

Michael G. Adams **Kentucky Secretary of State** Received and Filed:

7/27/2021 9:26 AM Fee Receipt: \$265.00

RST

Michael G. Adams 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 2011 through 2021

Exact limited liability company name and principal office address **CROSSFIELD, LLC**

627 BURR OAK NICHOLASVILLE KY 40356

Signature of member Or manager (Required)

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 https://web.sos.ky.gov/ftsearch or can be downloaded from our website.

Registered Agent and Registere	I Office Address	\$ j *			
CHRIS RODGERS					
627 BURR OAK	• •				
_ NICHOLASVILLE, KY 40	356		·		
If the above company is included in a		y tax return as a disrega	arde		
company's information here (optional)					
FEIN: Name:				. '	
Members - List the name And address LLCs are not required to list their members.	of the limited liability company's			Profit in the second	
CHRIS RODGERS	[62]	Burr Da	K Dr Did	holasville	Ky Yossi
				The second second	
4 4				4 80 4 W. 1	
The above entity was administrative undersigned states that the ground requirements of KRS 275.295. En	ls for dissolution either o closed is a check in the a	did not exist or have be amount of \$265.00, pa	een eliminated, an ayable to Kentucky	d the entity's name so State Treasurer.	satisfies the
Under penalty of perjury, the below information pertaining to CROSSF					
If not an officer of said entity, plea	e provide a Declaration	of Power of Attorney	with the Reinstate	ment Application.	
x Cli		owner		<u> </u>	2-21
Signature of member Or manage	(Required)	Title (Ro	equired)	Date	e (Required)

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

Fax: 502-564-0058

CROSSFIELD, LLC 627 BURR OAK NICHOLASVILLE KY 40356 Notice Date: July 27, 2021 KY SoS Org. ID: 0578752

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: Tonja REV3883, Taxpayer Services Specialist II

Email: Tonja.Lilly@ky.gov Direct: 502-564-7289