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LRPFAlison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
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Fee Receipt: \$145.00

Organization ID # 0876252

State of origin KY

Filing fee \$145.00 Alison Lundergan Grimes, Secretary of State

Commonwealth of Kentucky

Reinstatement Application and
Reinstatement Annual Report
For the years 2015 through 2017

RST

Alison Lundergan Grimes
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 addressMAYN SALON, LLC
200 BROWNS LANE
SUITE B
LOUISVILLE KY 40207

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

Registered Agent and Registered Office AddressMOLLY BURKE
MOLLY BURKE LAW OFFICE, PLLC
815 JOHN HARPER HWY #5
SHEPHERDSVILLE, KY 40165

If the above company is included in a parent company's Kentucky tax return as a disregarded entity or a subsidiary, please provide the parent company's information here (optional):

FEIN: _____ Name: Mayn Salon LLC / Brandi Maynard**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.Brandi MaynardMember Mayn Salon LLC

The above entity was administratively dissolved on September 12, 2015 because the entity did not file its annual report for the year 2015. 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 \$145.00, 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 MAYN SALON, 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

Signature of member or manager (Required)

Title (Required)

Date (Required)

Member8/30/17



DANIEL P. BORK
Commissioner

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

August 31, 2017

**MAYN SALON, LLC
200 BROWNS LANE
SUITE B
Louisville KY 40207**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **MAYN SALON, LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2016, 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,

Rada REV6015, Taxpayer Services Specialist II
Pass Through Entity Tax Branch
501 High Street, Mail Sta. 52
Frankfort, KY 40601
Phone# (502) 564-7336
FAX# (502) 564-0058

Kentucky Secretary of State organization number 0876252