

0785353.06

amcray
LRPF

Organization ID # 0785353

State of origin KY

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

Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
12/17/2018 2:22 PM
Fee Receipt: \$145.00Alison Lundergan Grimes
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 2016 through 2018**RST****Exact limited liability company name and principal office address**AUTOMOTIVE CONCEPTS LIMITED LIABILITY COMPANY
133 APPLETREE CT
FRANKFORT KY 40601The 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 Address**CRYSTAL HARRIS
133 APPLETREE CT.
FRANKFORT, KY 40601If 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: _____

Managers - List the name and address of the limited liability company's managers. If not specified, addresses default to the LLC's principal office address.CRYSTAL HARRIS

_____The above entity was administratively dissolved on October 1, 2016 because the entity did not file its annual report for the year 2016.
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 AUTOMOTIVE CONCEPTS LIMITED LIABILITY COMPANY 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 *Crystal Harris*

Signature of member or manager (Required)

Owner

Title (Required)

12-10-18

Date (Required)



KENTUCKY DEPARTMENT OF REVENUE
DIVISION OF CORPORATION TAX
501 HIGH STREET, STATION 52
FRANKFORT, KENTUCKY 40601-2103

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

**AUTOMOTIVE CONCEPTS LIMITED LIABILITY
COMPANY**
133 APPLETREE CT
FRANKFORT KY 40601

Notice Date: December 17, 2018
KY SoS Org. ID: 0785353

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: Rada REV6015, Taxpayer Services Specialist II
Email: Rada.Moravac@ky.gov
Direct: 502-564-7336
