Michael G. Adams Secretary of State P. O. Box 718       Reinstatement Application and Reinstatement Annual Report (502) 564-3490       RST         Frankfort, KY 40602-0718 (502) 564-3490       Reinstatement Annual Report For the year 2021       RST         Exact limited liability company name and principal office address COYOTE RIDGE ENTERPRISE LLC 3678 HWY 650 ELKFORK KY 41421       The principal 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: Website         Registered Agent and Registered Office Address ELIZABETH A BALEY 3678 HWY 650 ELKFORK, KY 41421       The principal office address of the imited liability company's kentucky tax return as a disregarded entity of a substolary, please provide the parent company's information here (optional): FIN: Name:	Organization ID # 0852764 Commonwealth of Kentucky State of origin KY Filing fee \$115.00 Michael G. Adams, Secretary of State		State Michael G. Adams Kentucky Secretary of State Received and Filed:
COYOTE RIDGE ENTERPRISE LLC       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 <u>https:</u> <u>lweb.sos.ky.gov[ftsearch</u> or can be downloaded         Registered Agent and Registered Office Address ELIZABETH A. BAILEY 3678 HWY 650 ELKFORK, KY 41421       Image: Company's Kentucky tax return as a disregarded entity of a subsidiary, please provide the parent company's information here (optional): FEIN:	Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490	Reinstatement Annual Re	and Det
ELIZABETH A. BAILEY 3678 HWY 650 ELKFORK, KY 41421 If the above company is included in a parent company's Kentucky tax return as a disregarded entity of a subsidiary, please provide the parent company's information here (optional): FEN: Name: 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.	COYOTE RIDGE ENTERPRIS 3678 HWY 650	ELLC age on mou file stat	nt name/office address cannot be changed this form. When reinstating, you cannot dify the addresses until the reinstatement is d. Once the reinstatement is filed, the ement of change can be filed online at <u>https:</u>
managed LLCs are not required to list their members.	ELIZABETH A. BAILEY 3678 HWY 650 ELKFORK, KY 41421 If the above company is included in a part company's information here (optional):		a subsidiary, please provide the parent
	managed LLCs are not required to list their men	the limited liability company's members. If not specified, addresses d	efault to the LLC's principal office address Member-

The above entity was administratively dissolved on October 18, 2021 because the entity did not file its annual report for the year 2021. 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 \$115.00, 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 COYOTE RIDGE ENTERPRISE 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.

11-5-21 ugnl Date (Required)

Signature of member Or manager (Required)

Title (Required)



## COYOTE RIDGE ENTERPRISE LLC 3678 HWY 650 ELKFORK KY 41421

Notice Date: November 15, 2021 KY SoS Org. ID: 0852764

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	We verified the following information.	
	<ol> <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: Megan REVY099, Taxpayer Services Specialist I Email: MeganD.Roberts@ky.gov Direct: 502-564-7310	