Organization ID # 0659366 Commonwealth of Kentucky
State of origin KY
Filing fee \$145.00 Alison Lundergan Grimes, Secretary of Sta

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Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 3/15/2019 3:33 PM Fee Receipt: \$145.00

RST

Alison 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 2017 through 2019

Exact limited liability company name and principal office address

PAT CREECH INSURANCE, LLC 108 BURLEY DR. SUITE 2 MT. STERLING KY 40353 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 <a href="mailto:app.sos.ky.gov/ftsearch">app.sos.ky.gov/ftsearch</a> or can be downloaded from our website.

Registered Agent and Registered Office Address

PATRICIA CREECH 100 N. MAYSVILLE STREET SUITE 305 MT. STERLING, KY 40353

If the above company is included in a parent company's Kentucky tax return as a disregarded company's information here (optional);

FEIN: \_\_\_\_\_\_ Name: \_\_\_\_\_

a. Get

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.

PATRICIA CREECH

The above entity was administratively dissolved on October 9, 2017 because the entity did not file its annual report for the year 2017. 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 PAT CREECH INSURANCE, 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 TOULUSA CIECLA Signature of member Or manager (Required)

Dwner - I

Date (Required)

Title (Required)

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

March 15, 2019

0659366

502-564-0058 Fax:

PAT CREECH INSURANCE, LLC 100 DEBLYNN CT MT. STERLING KY 40353

Notice Date:

KY SoS Org. ID:

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: Adja REV3995, Revenue Auditor I

Email: Adja.Teuw@ky.gov Direct: (502) 782-2500