Organization ID # 0577268 State of origin KY ____

Filing fee(\$130.00

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of St

0577268.06

SosIntern LRPF

Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 2/25/2019 1:38 PM Fee Receipt: \$130.00

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 2018 through 2019

RST

Exact limited liability company name and principal office address A-PLUS NAILS & HAIR, LLC 4155 SHELBYVILLE RD. 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 filed online at app.sos.ky.gov/ftsearch or can be downloaded from our website.
Registered Agent and Registered Office Address	
HOLLY PHAM 4155 SHELBYVILLE RD.	
LOUISVILLE, KY 40207	
If the above company is included in a parent company's Kentucky tax return as a disregarded	
company's information here (optional);	
FEIN: 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.	
HOLLY PHAM	11/6/21/1
TIOLET TOWN	
	——————————————————————————————————————
	2018
The above entity was administratively dissolved on October 16, 2018 be	cause the entity old not tile its annual report for the year 2010.
The undersigned states that the grounds for dissolution either did not ex	10 00 novemble to Kaptilday State Tracturer
requirements of KRS 275.295. Englosed is a check in the amount of \$1	
Under penalty of perjury, the below signed hereby authorizes the Kentuc	ky Department of Revenue to release any applicable tax
information pertaining to A-RLUS NAILS & HAIR, 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.
	member // 2/18/19
Signature of member or manager (Required)	Title (Required) Date (Required)

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

Notice Date:

February 25, 2019

KY SoS Org. ID: 0577268

4155 SHELBYVILLE RD. LOUISVILLE KY 40207

A-PLUS NAILS & HAIR, LLC

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: John REV3858, Revenue Auditor I

Email: John.Cornett@ky.gov

Direct: 502-564-2099