Organization ID # 0584769 Commonwealth of Kentucky
State of origin KY
Filing fee \$115.00 Alison Lundergan Grimes, Secretary of Sta

0584769.06

amcray LRPF

Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 10/12/2015 2:27 PM Fee Receipt: \$115.00

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 year 2015

Exact limited liability company name and principal office address KINGPIN LLC

KINGPIN LLC KINGPIN LANES 9525 TAYLORSVILLE ROAD JEFFERSONTOWN KY 40299 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

GEORGE W. VIETH, JR. 3365 GREEN HILL LANE LOUISVILLE, KY 40207



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.

GEORGE VIETH JR	3365 Arefn Hill Lane Wyky 40207
STEVEN PARADISE	2901 A BUCKEYE LANE Goshen ky 40026

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 \$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 KINGPIN LL 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.

Signature of paember or manager (Required)

OCUSIAL MANAGER

Title (Required)

Date (Required)



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

October 12, 2015

KINGPIN LLC KINGPIN LANES 9525 TAYLORSVILLE ROAD JEFFERSONTOWN KY 40299

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **KINGPIN LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2014, 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,

Stephanie REVX219, Taxpayer Services Specialist I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2028 FAX# 502-564-3392

Kentucky Secretary of State organization number 0584769

