Organization ID # 0587971 Commonwealth of Kentucky
State of origin KY
Filing fee \$130.00 Alison Lundergan Grimes, Secretary of S

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Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 12/9/2015 11:28 AM Fee Receipt: \$130.00

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 2014 through 2015

Exact limited liability company name and principal office address
TRANSPAY SOLUTIONS LLC
340 PRODUCTION COURT
LOUISVILLE 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.kv.gov/ftsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

BECKY FAITH 340 PRODUCTION COURT LOUISVILLE, KY 40299

dresse	s default to the	e LLC's princi	pal office ad	dress.	

Managers - List the name and address of the limited liability	company's managers. If not specified, addresses default to the LL	C's principal office address.
BECKY FAITH		
JERRY FAITH		

The above entity was administratively dissolved or 2014. The undersigned states that the grounds for satisfies the requirements of KRS 275.295. Enclose	dissolution either did not exist or have been elim	inated, and the entity's name
Under penalty of perjury, the below signed hereby information pertaining to TRANSPAY SOLUTIONS 271B.14-220.	authorizes the Kentucky Department of Revenue LLC to the Secretary of State, as required for rei	to release any applicable tax instatement pursuant to KRS
If not an officer of said entity, please provide a Dec	claration of Power of Attorney with the Reinstatem	10 0 17
Signature of member of manager (Required)	Title (Required)	12-2-15
Organizate of member d manager (Nedured)	i ilie (Keduired)	Date (Required)



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKSExecutive Director

December 9, 2015

TRANSPAY SOLUTIONS LLC 11400 DECIMAL DRIVE SUITE 1006 LOUISVILLE, KY. 40299

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **TRANSPAY SOLUTIONS 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,

Brad REVX069, Taxpayer Services Specialist II Division of Corporation Tax State Office Building, 501 High Street, Mail Station 52 Frankfort, KY 40601 502-564-8139 ext.42055 FAX# 502-564-0058

Kentucky Secretary of State organization number 0587971

