Organization ID # 0493376 State of origin

Commonwealth of Kentucky Filing fee \$115.00 Alison Lundergan Grimes, Secretary of St

0493376.06

Alison Lundergan Grimes

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 2014

Kentucky Secretary of State Received and Filed: 11/3/2015 10:27 AM Fee Receipt: \$115.00

Evact limited	l liability company	name and princ	ipal office address
LXACL HIIILEU	Hability Company	name and pinic	ipai Office addices

140 COCHRAN ROAD, LLC **327 RIDGEWAY ROAD LEXINGTON KY 40502**

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.

		TO SERVICE STATE OF THE SERVIC		
Posistored Asset and	Registered Office Address			
THOMAS PREI	20,000,000,000	2 1 1 1 1	20	
327 RIDGEWA	45401 L T 45004 T 1 1			
LEXINGTON, K		2000		
LEXIIIO I OII, II	1 40002			
Managers - List the name at	nd address of the limited liability compa	uny's managers. If not specified, ad	dresses default to the LLC's principal	office address.
THOMAS A PRELAZ				
			A AMERICA	
2014. The undersigned st satisfies the requirements Under penalty of perjury, information pertaining to 1271B.14-220.	ninistratively dissolved on Sepates that the grounds for diss of KRS 275.295. Enclosed is the below signed hereby auth 40 COCHRAN ROAD, LLC to	olution either did not exist a check in the amount of orizes the Kentucky Depa o the Secretary of State, a	or have been eliminated, an \$115.00, payable to Kentuc artment of Revenue to release as required for reinstatement	d the entity's name ky State Treasurer. e any applicable tax pursuant to KRS
If not an officer of said en	tity, please provide a Declarat	tion of Power of Attorney v	with the Reinstatement Applic	cation.
X Proposed		MEMBER	<i>v./00_1/_</i>	10/19/15
Signature of member	or manager (Registred)	Tide (Re	quired)	Date (Required)



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

November 3, 2015

140 COCHRAN ROAD, LLC 327 RIDGEWAY ROAD LEXINGTON KY 40502

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **140 COCHRAN ROAD, LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2013, 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,

Jay REVX255, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2057 FAX# 502-564-0058

Kentucky Secretary of State organization number 0493376

