Organization ID # 0992277 State of origin

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

0992277.06

vmiller **LRPF**

Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 11/21/2019 2:32 PM Fee Receipt: \$115.00

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 year 2019

RST

Exact limited liability company name and principal office address

BREAKERS GRILL, LLC 8143 MALL ROAD

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

| FLORENCE KY 41042 | | 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 Addres | <u>s</u> | • |
| Jason Shearer | | |
| Florence, KY 41042 | | The second secon |
| If the above company is included in a parent company's company's information here (optional): FEIN: Name: | Kentucky tax return as a disregard | t . |
| Members - List the name And address of the limited liability of LLCs are not required to list their members. | ompany's members. If not specified, address | ses default to the LLC's principal office address Member-managed |
| JASON A SHEARER | | · |
| The above entity was administratively dissolved on | October 16, 2019 because the e | ntity did not file its annual report for the year 2019 |
| | ution either did not exist or have l | peen eliminated, and the entity's name satisfies the |
| Under penalty of perjury, the below signed hereby a information pertaining to Breakers Grill, LLC to the | authorizes the Kentucky Departm Secretary of State, as required fo | ent of Revenue to release any applicable tax or reinstatement pursuant to KRS 271B.14-220. |
| If not an officer of said entity, please provide a Dec | laration of Power of Attorney with | the Reinstatement Application. |
| X Jan de | Bures | 11-15-19 |
| (/Signature of member Or manager (Required) | Title (Require | ed) Date (Required) |

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

502-564-0058 Fax:

Breakers Grill, LLC 8143 Mall Road Florence KY 41042

Notice Date:

November 21, 2019

KY SoS Org. ID: 0992277

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: Tonja REV3883, Taxpayer Services Specialist I

Email: Tonja.Lilly@ky.gov Direct: 502-564-7289