Organization ID # 1184779 State of origin **Filing fee \$130.00**

Commonwealth of Kentucky Michael G. Adams, Secretary of State

1184779.06

mwellman **LRPF**

Michael G. Adams **Kentucky Secretary of State** Received and Filed: 4/18/2024 1:01 PM Fee Receipt: \$130.00

Michael G. Adams 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 2023 through 2024

RST

Exact limited liability company name and principal office address **SMART MOUTH, LLC** 1155 SALEM CHURCH RD

MORGANFIELD KY 42437

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 https:// web.sos.ky.gov/bussearchnprofile/search.aspx or can be downloaded from our website.

Registered Agent and Registered Office Address

Darla O'Nan 1155 Salem Church Rd Morganfield, KY 42437

If the above company is included in a parent company's Kentucky tax return as a disregarded entity of a subsidiar

company's inform	ation here (optional): Name:	· · · · · · · · · · · · · · · · · · ·				•
	the name And address of the limited li	ability company's	members. If no	t specified, address	es default to the LLC's principal office addr	ess Membel
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The above entity was administratively dissolved on October 4, 2023 because the entity did not file its annual report for the year 2023. 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 \$130.00, 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 Smart Mouth, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

f not an officer of said entit	, please provide a Dec	laration of Power of	Attorney with the Re	instatement Applicatio	n.
X Day Car		mem	bec	4	12/24
Signature of member Or	manager (Required)		Title (Required)		Date (Required)

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

Fax: 502-564-0058

Smart Mouth, LLC 1155 Salem Church Rd Morganfield KY, 42437 Notice Date:

April 18, 2024

KY SoS Org. ID: 1184779

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.
- 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: James REVE277, Taxpayer Services Specialist III

Email: James.Sutherland@ky.gov

Direct: 502-564-7359