Organization ID # 0878982 State of origin

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

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LRPF Alison Lundergan Grimes

Kentucky Secretary of State Received and Filed: 9/29/2015 8:53 AM Fee Receipt: \$115.00

KOI

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

LECOMPTE FARMS, LLC **686 VIGO ROAD SHELBYVILLE KY 40065**

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

DAVID SCOTT LECOMPTE 686 VIGO ROAD SHELBYVILLE, KY 40065



Members - List the name and address of the limited liability compa	any's members. If not specified, addresses default to the LLC's principa	al office address., Member-managed
DAVIA Scott LECOMPTE LISA HAN LECOMPTE		
LISA HIN LECOMPIZ		
The above entity was administratively dissolved on Se 2015. The undersigned states that the grounds for diss satisfies the requirements of KRS 275.295. Enclosed in	solution either did not exist or have been eliminated,	and the entity's name
Under penalty of perjury, the below signed hereby auth information pertaining to LECOMPTE FARMS, LLC to 271B.14-220.	horizes the Kentucky Department of Revenue to rele the Secretary of State, as required for reinstatement	ase any applicable tax pursuant to KRS
If not an officer of said entity, please proyide a Declara	ation of Power of Attorney with the Reinstatement Ap	plication.
X VandSettlyk		9-25-15
Signature of member or manager (Required)	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

September 28, 2015

LECOMPTE FARMS, LLC 686 VIGO ROAD SHELBYVILLE KY 40065

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **LECOMPTE FARMS**, **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,

Theresa REV0868, Taxpayer Services Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7288 FAX# 502-564-0058

Kentucky Secretary of State organization number 0878982

