| Organization ID # 0711685   | -   |   |  | amcray<br>LRPF |
|---|---|---|--|----------------|
| Organization ID # 0711685 Commonwealth of Kentucky<br>State of origin KY<br>Filing fee \$130.00 Alison Lundergan Grimes, Secretary of St  |   |   | Alison Lundergan Grimes  | !              |
| Alison Lundergan Grimes<br>Secretary of State<br>P. O. Box 718<br>Frankfort, KY 40602-0718<br>(502) 564-3490<br>http://www.sos.ky.gov   | Reinstatement Annua   | instatement Application and<br>einstatement Annual Report<br>For the years 2015 through 2016                    |  |                |
| Exact limited liability company<br>ALTERNATIVE VIEW, P<br>13962 KY RT 979<br>BEAVER KY 41604  | <u>name and principal office address</u><br>LLC   | name/office addre<br>form. When reinsta<br>addresses until the<br>reinstatement is file                         | ce address and registered agent<br>ess cannot be changed on this<br>ating, you cannot modify the<br>reinstatement is filed. Once the<br>ad, the statement of change can be<br>aos.ky.gov/ftsearch<br>ur website. |                |
| Registered Agent and Register<br>HEATHER D TACKETT<br>13962 KY RT 979<br>BEAVER, KY 41604<br>Members - List the name and address of<br>LLCs are not required to list their members. | ed Office Address<br>the limited liability company's members. If not specified, addres  | ses default to the LLC's prin   | cipal office address Member-managed  | ~              |
| HEATHER D TACKETT   |   |   |  |                |
|   |   | ter de la companya de |  |                |
|   |   |   | <u> </u>   |                |
| ·····································   |   | ······································  | <u></u>  |                |
| 2015. The undersigned states that I satisfies the requirements of KRS 2   | ly dissolved on September 12, 2015 because the<br>fre grounds for dissolution either did not exist or<br>75.295. Enclosed is a check in the amount of \$<br>signed hereby authorizes the Kentucky Departn | have been eliminate<br>130.00, payable to Ke  | d, and the entity's name<br>entucky State Treasurer.   |                |
| information pertaining to ALTERNA<br>271B.14-220.   | TIVE VIEW, PLLC to the Secretary of State, as   | required for reinstate  | ment pursuant to KRS   |                |
|   | provide a Declaration of Power of Attorney with   | h the Reinstatement   | Application.   |                |
| Signature of member or manager (  | tequired) Owner, Presite  | M   | //12/16<br>Date (Required)   |                |
|   |   |   |  |                |
|   |   |   |  |                |



DANIEL P. BORK Commissioner

## FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

BOB BROOKS Executive Director

January 14, 2016

## ALTERNATIVE VIEW, PLLC 13962 KY RT 979 BEAVER KY 41604

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **ALTERNATIVE VIEW**, **PLLC** 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,

Jessica REV0467, Revenue Auditor II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7317 FAX# 502-564-0058

Kentucky Secretary of State organization number 0711685

