Organization ID # 0598987 State of origin

Filing fee

KY

Exact limited liability company name and principal office address

Commonwealth of Kentucky \$115.00 Elaine N. Walker, Secretary of State 0598987.06

The principal office address and registered agent

name/office address cannot be changed on this form. When reinstating, you cannot modify the

dcornish **LRPF** 

Elaine N. Walker, Secretary of State

Received and Filed: 11/16/2011 10:45 AM Fee Receipt: \$115.00

Elaine N. Walker 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 2011

**RST** 

FORT MITCHELL KY \$1017 410 11		reinstatement is filed, the state	addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at <a href="mailto:app.sos.ky.gov/ftsearch">app.sos.ky.gov/ftsearch</a> or can be downloaded from our website.	
Registered Agent and Registered Office Address	STTU A			
LINDA IRELAND				
169 KRUEMPELMAN DR				
FORT MITCHELL, KY 41017	AND WE SA	To the test of the LLC	"e nancinal office address	
Members - List the name and address of the limited liabili Member-managed LLCs are not required to styling members.	ty company's members in	of specified, addresses default to the LLC	s principal onice accress.	
LINDA IRELAND				
	/ EVENIA	A Company		
	W Track			
	/25/			
The above entity was administratively dissolved on Se	eptember 10, 2011 because	the entity did not file its annual	report for the year	
2011. The undersigned states that the graunds for dis- satisfies the requirements of KRS 275 295. Enclosed	is a check in the arrivum of	to a particular of Positive to release a	ny annlicable tax	
Under penalty of perjury, the pelow signed hereby aut information pertaining to SADDLE GLUB, VLC to the S	inorizes the Kentucky Depai Secretary of State) as require	ed for reinstatement pursuant t	o KRS 271B.14-220.	
information pertaining to SADDLE 1000, 1110 to the	ation of Daver of Attorney w	ith the Reinstatement Applicat	ion.	
If not an officer of said entity, please provide a Declar	ation of rober of virgines w	A A	10-21-11	
X / TIM Mi sed sols ?	/, <b>Legica</b>	uired) / A 24 \$	Date (Required)	



THOMAS B. MILLER
Commissioner

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

**ELYSE WEIGEL**Deputy Commissioner

BOB BROOKS
Executive Director

November 15, 2011

SADDLE CLUB, LLC 169 KRUMPELMAN DR FORT MITCHELL KY 41011

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **SADDLE CLUB, LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2010, 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,

Christina Owens, Revenue Auditor Pass Through Entity Tax Branch 501 High Street, Mail Sta. 69 Frankfort, KY 40620 502-564-7339 FAX# 502-564-3392

Kentucky Secretary of State organization number 0598987

