Organization ID # 0681189 State of origin

Alison Lundergan Grimes

Secretary of State

P. O. Box 718

Frankfort, KY 40602-0718

(502) 564-3490 http://www.sos.ky.gov

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

0681189.06

bschell **LRPF**

Alison Lundergan Grimes

Received and Filed: 9/17/2012 2:46 PM Fee Receipt: \$115.00

Reinstatement Application and Reinstatement Annual Report For the year 2012

RST

Exact limited liability company name and principal office address

1ST IMPACT, LLC P.O. BOX 50 **FORT THOMAS KY 41075** 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

THOMAS F. GOEKE, JR. 27 EAST FOURTH STREET **COVINGTON, KY 41011**



nagers - List the name and address of the limited liability company's managers. If not specified, addresses Y ALLEN CRAWFORD	
e above entity was administratively dissolved on September 11, 2012 because the entity did not file 12. The undersigned states that the grounds for dissolution either did not exist or have been elimin isfies the requirements of KRS 275.295. Enclosed is a check in the amount of \$115.00, payable to	ated, and the entity's name
der penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to rmation pertaining to 1ST IMPACT, LLC to the Secretary of State, as required for reinstatement pu	o release any applicable tax ursuant to KRS 271B.14-220.
ot an officer of said entity please provide a Seclaration of Power of Attorney with the Reinstateme	nt Application.
Stonature of member or manager (Reduited) I Title (Required) Title (Required)	1/14/12
Signature of member or manager (Regulated)	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 17, 2012

1ST IMPACT, LLC P.O. BOX 50 FORT THOMAS KY 41075

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **1ST IMPACT, LLC** has filed Kentucky Income Tax Returns through the tax year ended 2011, 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,

James Sutherland, Revenue Program Officer Pass Through Entity Branch 501 High Street, Mail Station 69 Frankfort, KY 40601 Phone: (502) 564-7359

Fax: (502) 564-735 Fax: (502) 564-3392

Kentucky Secretary of State organization number 0681189

