Organization ID # 1031093 State of origin **KY** Filing fee \$130.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

1031093.06

Michael G. Adams

Kentucky Secretary of State Received and Filed: 5/17/2021 3:15 PM Fee Receipt: \$100.00

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 2020 through 2021

Exact limited liability	company	y name	and	principal	office	address
BLUEGRAS	BAR-B-	QUE LL	.C			

1916 SHORES ROAD **FALLS OF ROUGH KY 40119** 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

	downloade	d from our website.
Registered Agent and Registered Office Address	FEIN (C	Optional)
PATINA MCCORMICK		
1916 SHORES ROAD	•	
Falls Of Rough, KY 40119		J
If the above company is included in a parent company's Kentuck company's information here (optional):	ky tax return as a disregard	ent
FEIN: Name:		
Tunio.		
Members - List the name And address of the limited liability company's LLCs are not required to list their members.	members. If not specified, addresses default to the LL	.C's principal office address., Member-managed
PATINA M MCCORMICK		· · · · · · · · · · · · · · · · · · ·
		
		
 		
The above entity was administratively dissolved on Octob	er 8, 2020 because the entity did not file	its annual report for the year 2020.
The undersigned states that the grounds for dissolution ei requirements of KRS 275.295. Enclosed is a check in the	ther did not exist or have been eliminate amount of \$130.00, payable to Kentucky	d, and the entity's name satisfies the
Under penalty of perjury, the below signed hereby authori	· •	
information pertaining to BLUEGRASS BAR-B-QUE LLC	to the Secretary of State, as required for	reinstatement nursuant to KRS
271B.14-220.	io the cooletary of class, as required to	romotatomont parodam to 14 to
(/	of Bower of Attorney with the Beinstate	mont Application
If not an officer of said entity, please provide a Declaration	•	intent Application.
X Talena MI. Mc Cornick	Member	4/26/2021
Signature of member Or manager (Required)	Title (Required)	Date (Required)
l		
	•	

www.revenue.ky.gov Website: Phone: 502-564-8139 Fax: 502-564-0058

BUCKLES TRAVIS & HART PLLC PO BOX 4069 LEITCHFIELD KY 42755

Notice Date: May 17, 2021 KY SoS Org. ID: 1031093

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.

An authorized person requested this letter.

3. You filed income and LLE tax returns as required, or you are exempt from

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
 - 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: Tonja REV3883, Taxpayer Services Specialist II

Email: Tonja.Lilly@ky.gov Direct: 502-564-7289