Organization ID # 0799594 State of origin

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

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Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed: 10/11/2013 11:11 AM Fee Receipt: \$115.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

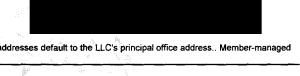
Reinstatement Application and **Reinstatement Annual Report** For the year 2013

Exact limited liability company name and principal office address AMMERMAN FAMILY DAYCARE AND LEARNING CENTER, LLC **109 MAPLE AVENUE FALMOUTH KY 41040**

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 **BOBBY AMMERMAN** 2010 KY. HWY. 17 NORTH

BUTLER, KY 41006



Members - List the name and address of the limited liability company's members. If not specified, addresses default to the LLC's principal office address.. Member-managed LLCs are not required to list their members ANGIE AMMERMAN The above entity was administratively dissolved on September 28, 2013 because the entity did not file its annual report for the year 2013. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 275.295. Enclosed is a check in the amount of \$115.00, payable to Kentucky State Treasurer. Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to AMMERMAN FAMILY DAYCARE AND LEARNING CENTER, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

of member or manager (Required)



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKSExecutive Director

October 11, 2013

AMMERMAN FAMILY DAYCARE AND LEARNING CENTER, LLC 109 MAPLE AVENUE FALMOUTH KY 41040

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **AMMERMAN FAMILY DAYCARE AND LEARNING CENTER, LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2012, 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,

Brandon Keenon, Revenue Auditor I Pass Through Entity Branch 501 High Street, Mail Station 69 Frankfort, KY 40601

Phone: (502) 564-7337 Fax: (502) 564-3392

Kentucky Secretary of State organization number 0799594

