SUMMODIWEARD OF NEMBERY Late of origin ing fee \$115.00 Alison Lundergan Grimes, Secretary of \$0841794.06

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Alison Lundergan Grimes

Kentucky Secretary of State Received and Filed: 11/5/2014 10:03 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 2014

Exact limited liability company name and principal office address LONG HAUL FITNESS LLC

152 SHERMAN AVE. **LEXINGTON KY 40502**

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 |
|------------------|----------------|----------------|
|------------------|----------------|----------------|

DAVID GARLAND HURT 3440 RICHMOND RD. **LEXINGTON, KY 40509**

Members - List the name and address of the limited liability company's members. If not specified, addresses uerau LLCs are not required to list their members.

| DAVID G HURT | 152 Sterman ave. Lexington NY 40502 |
|--------------|-------------------------------------|
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The above entity was administratively dissolved on September 30, 2014 because the entity did not file its annual report for the year 2014. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's hame 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 LONG HAUL FITNESS 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.

| Signature of member or manager (Required) | Registered Agend | Date (Regulared) |
|---|---|------------------|
| | , | |



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

November 5, 2014

LONG HAUL FITNESS LLC 152 SHERMAN AVE. LEXINGTON KY 40502

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **LONG HAUL FITNESS LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2013, 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,

Brad REVX069, Taxpayer Services Specialist II Division of Corporation Tax State Office Building, 501 High Street, Mail Station 52 Frankfort, KY 40601 502-564-8139 ext.42055 FAX# 502-564-0058

Kentucky Secretary of State organization number 0841794

