P. O. Box 718	leinstatement Application a	
Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Annual Repo For the year 2022	
Exact limited liability company name and p JASON WEATHERFORD INSURANC 10293 N HIGHWAY 1247 EUBANK KY 42567	E AGENCY, LLC agent a modify filed. O statem	incipal office address and registered name/office address cannot be changed s form. When reinstating, you cannot the addresses until the reinstatement is once the reinstatement is filed, the ent of change can be filed online at <u>https:</u> <u>os.ky.gov\ftsearch</u> or can be downloaded
Registered Agent and Registered Office Ad Jason Weatherford 10293 N Highway 1247 Eubank, KY 42567 The above company is included in a parent comp company's information here (optional): EN: Name:	any's Kentucky tax return as a disregarded entity or a s	ubsidiary, please provide the parent
	d liability company's members. If not specified, addresses defa	ult to the LLC's principal office address Member

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 JASON WEATHERFORD INSURANCE AGENCY, 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.

Manber Title (Required) 2022 X Signature of member Ormanager (Required)



JASON WEATHERFORD INSURANCE AGENCY, LLCNotice Date:November 1, 2022429 OGDEN STKY SoS Org. ID:1135294SOMERSET KY 42501KY SoS Org. ID:1135294

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.
	 You are registered with the Department of Revenue. An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing. 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	 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 date above. 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. 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: Megan REVY099, Taxpayer Services Specialist II Email: MeganD.Roberts@ky.gov Direct: 502-564-7310