Organization ID # 0850697 State of origin

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

0850697.06

LRPF

Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed: 10/24/2017 8:39 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 2017

Exact limited liability company name and p	<u>principal office address</u>
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LA MODA LLC 1771 1/2 ALEXANDRIA DR. LEVINOTON ICV 40504

Signature of member or manager (Required)

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

LEXINGTON KY 40504		filed online at app.sos.ky.gov/ftsearch or can be downloaded from our website.
Registered Agent and Registered Office	Address	FEIN (Optional)
JOSE M. CRUZ TELLES		
1771 1/2 ALEXANDRIA DR. LEXINGTON, KY 40504		
If the above company is included in a parent company's information here (optional):	empany's Kentucky tax return as a disregarde	it
FEIN: Name:		
Managers - List the name and address of the limite	ed liability company's managers. If not specified, addresses d	efault to the LLC's principal office address.
JOSE M. CRUZ TELLES		
ALBA CRUZ		
The undersigned states that the grounds fo	olved on October 9, 2017 because the entity or or dissolution either did not exist or have been a check in the amount of \$115.00, payable to	eliminated, and the entity's name satisfies the
Under penalty of perjury, the below signed information pertaining to LA MODA LLC to	hereby authorizes the Kentucky Department the Secretary of State, as required for reinsta	of Revenue to release any applicable tax tement pursuant to KRS 271B.14-220.
If not an officer of said entity, please provid	de a Declaration of Power of Attorney with the	Reinstatement Application.
X (y)	OWNER	10-16-17
Signature of member or manager (Required)	Title (Required)	Date (Required)

Title (Required)



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

October 23, 2017

LA MODA LLC 1771 1/2 ALEXANDRIA DR. LEXINGTON KY 40504

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **LA MODA LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2016, 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,

Erika REV3847, Revenue Auditor II Pass Through Entity Branch 501 High Street, Mail Station 52 Frankfort, KY 40601 Phone# (502) 564-2039 Fax# (502) 564-0058

Kentucky Secretary of State organization number 0850697

