Organization ID # 0799298 State of origin KY Filing fee \$115.00 Alison Lundergan Grimes, Secretar				O799298.06 dcornish LRPF Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 10/18/2016 11:12 AM	
Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstat		lication and lual Report ⁰¹⁶	Fee Receipt: \$1	15.00 RST
Exact limited liability company TOLER TIRE LLC 79 COLEMAN RD BELFRY KY 41514	name and principal o	ffice address	name/office acidre form. When reinsta addresses until the reinstatement is file	e address and registe ss cannot be changed ting, you cannot modify reinstatement is filed. C d, the statement of chan os, ky.gov/ftsearch or ar website.	on this the Droe the nge can be
				4	
Registered Agent and Registered Arthur Ray Leedy 79 Coleman Rd Belfry, KY 41514 Members - List the name and address of		mbers. If not specified, ac	dresses default to the LLC's princi	pal office address Me	mber-managed
LLCs are not required to list their members. ARTHUR_LEEDY, JR., DVM					
	· 				
The above entity was administrative The undersigned states that the gro requirements of KRS 275.295. Enclo	unds for dissolution eithe osed is a check in the an signed hereby authorize	er did not exist or ha nount of \$115.00, p s the Kentucky Dep	ave been eliminated, and ayable to Kentucky State artment of Revenue to rel	the entity's name Treasurer. ease any applica	satisfies the ble tax
Inder penalty of perjury, the below information pertaining to Toler Tire I If not an officer of said entity, please	•	•	· · ·		220.
information pertaining to Toler Tire I	•	f Power of Attorney	with the Reinstatement A		220. 14 - 16
If not an officer of said entity, please X A trunce Signature of member or manager (F	e provide a Declaration o	f Power of Attorney	with the Reinstatement A	pplication. 	220. / <u>4</u>
information pertaining to Toler Tire I If not an officer of said entity, please X A A A A A A A A A A A A A A A A A A A	e provide a Declaration o	f Power of Attorney <u>Lember</u> Title (R	with the Reinstatement A	pplication.	220. / <u>Y - //</u> guired)
information pertaining to Toler Tire I If not an officer of said entity, please X A A A A A A A A A A A A A A A A A A A	e provide a Declaration o	f Power of Attorney <u>Len Le</u> Trile (R	with the Reinstatement A	Dete (Re	220. / <u>Y ////</u> :quired)
information pertaining to Toler Tire I If not an officer of said entity, please X Aturna Signature of member or manager (Provide a Declaration o	f Power of Attorney	with the Reinstatement A equired)	Date (Re	220. Aquired)
information pertaining to Toler Tire I If not an officer of said entity, please X A A A A A A A A A A A A A A A A A A A	equired)	f Power of Attorney	with the Reinstatement A	pplication. / D-/ Date (Re	220. / <u>Y</u> ./ <u>/</u> :quired)
information pertaining to Toler Tire L If not an officer of said entity, please X Thirves Signature of member or manager (f Signature of member of member or manager (f Signature of member of member or manager (f Signature of member of	provide a Declaration o	f Power of Attorney Lember Title (R	with the Reinstatement A	pplication. / D-/ Date (Re	220. / <u>Y</u> ./ <u>/</u> equired)
information pertaining to Toler Tire I If not an officer of said entity, please X Totaria Signature of member or manager (Signature	Acquired a Declaration o	f Power of Attorney	with the Reinstatement A	pplication. / D-/ Date (Re	220. equired)
information pertaining to Toler Tire I If not an officer of said entity, please X Totaria Signature of member or manager (2000) 2000 2000 2000 2000 2000 2000 20	Acquired a Declaration o	f Power of Attorney	with the Reinstatement A	pplication. / D-/ Date (Re	220. (<u>4</u> - <u>16</u> equired)
information pertaining to Toler Tire I If not an officer of said entity, please X Total and the said entity, please Signature of member or manager (Signature of member or manager (Signature and member of member of member of the said states and said states and said sta	Acquired a Declaration o	f Power of Attorney	with the Reinstatement A	pplication. / D-/ Date (Re	220. / <u>Y . //</u> :quired)



DANIEL P. BORK Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

An Equal Opportunity Employer M/F/D

October 17, 2016

Toler Tire LLC 79 Coleman Rd Belfry KY 41514

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **Toler Tire LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2014, 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,

Ramon REV4636, Taxpayer Services Specialist I Pass Through Entity Branch 501 High Street, Mail Station 69 Frankfort, KY 40601 Phone: (502) 564-2169 Fax: (502) 564-3392

Kentucky Secretary of State organization number 0799298

