Organization ID# 0896234 State of origin

Commonwealth of Kentucky KY Filing fee \$160.00 Alison Lundergan Grimes, Secretary of State Kentucky Secretary of State

0896234.06

**bAlimonos LRPF** 

Alison Lundergan Grimes

Received and Filed: 5/31/2018 2:09 PM Fee Receipt: \$160.00

RST

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 years 2015 through 2018

| Exact limited liability company name and principal office address  MATADI, LLC  1000 BYPASS NORTH  LAWRENCEBURG KY 40342   | 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 <a href="mailto:app.sos.ky.gov/ftsearch">app.sos.ky.gov/ftsearch</a> or can be downloaded from our website. |
|--|---|
| Registered Agent and Registered Office Address  Krishnaben Patel 1000 Bypass North Lawrenceburg, KY 40342  If the above company is included in a parent company's Kentucky tax return as a disregacompany's information here (optional): FEIN: 41-1 Cleans I ame: Market Address   | FEIN (Optional)   |
| Members - List the name and address of the limited liability company's members. If not specified, ad LLCs are not required to list their members.  Krishnaben Patel  | dresses default to the LLC's principal office address Member-managed  |
| The above entity was administratively dissolved on September 12, 2015 becaus 2015. The undersigned states that the grounds for dissolution either did not exis satisfies the requirements of KRS 275.295. Enclosed is a check in the amount of Under penalty of perjury, the below signed hereby authorizes the Kentucky Dept. | t or have been eliminated, and the entity's name if \$160.00, payable to Kentucky State Treasurer.  artment of Revenue to release any applicable tax  |

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

| If flot all officer of said critis, product | •                |                 |
|---|------------------|-----------------|
| x 1/2 -                                     | owner            | 5/23/18         |
| Signature of member or manager (Required)   | Title (Required) | Date (Required) |

Website: www.revenue.kv.gov

Phone: 502-564-8139 502-564-0058 Fax:

MATADI, LLC 1000 Bypass North Lawrenceburg KY 40342

May 31, 2018 KY SoS Org. ID: 0896234

Notice Date:

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.

1. You are registered with the Department of Revenue.

- 2. An authorized person requested this letter.
- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 4. 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 1. 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.
  - 2. 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.
  - 3. 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: Bruce REV3968, Taxpayer Services Specialist I

Email: Bruce.Owens@ky.gov

Direct: 502-564-2038