| Örganization ID # 0874754 Commonwealth of Kentucky State of origin KY Filing fee \$115.00 Alison Lundergan Grimes, Secretary of St | | | | | | Allson Lundergan Grimes | |
|--|---------------------|-----------|--------------------------|---------------|--|--|---|
| Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov | | | temer ateme For th | nt År | Kentucky Secretary of State Received and Filed: 12/1/2015 8:36 AM Fee Receipt: \$115.00 | | |
| Exact limited liability company n TIENDA EL HARAGAN, L 901 FLEMING RD MAYSVILLE KY 41056 | | rincipa | l office ad | <u>idress</u> | n fi a r fi | ame/office addre orm. When reinst ddresses until the einstatement is file | ce address and registered agent ess cannot be changed on this ating, you cannot modify the reinstatement is filed. Once the ed, the statement of change can be <u>sos.ky.gov/ftsearch</u> or can be ur website. |
| Registered Agent and Registered | Coffice Ad | droco | | | 8 ° | | |
| REMEDIOS R MONDRAG | | uress | | | | | |
| 901 FLEMING RD | UN . | | | | | | |
| MAYSVILLE, KY 41056 | | | | | | | |
| Members - List the name and address of th LLCs are not required to list their members. | e limited liability | company's | s members. If r | not specified | , addresses defaul | t to the LLC's prin | cipal office address Member-managed |
| Patricia Zavala | | 901 | Flemin | a Rd | Mausvi | le Ky. | 41050 |
| | | | | J | j | | |
| | | | | | | jār | |
| The above entity was administratively 2015. The undersigned states that the satisfies the requirements of KRS 275 | e grounds fo | r dissol | ution either | did not e | exist or have b | een eliminate | d, and the entity's name |

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to TIENDA EL HARAGAN, 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.

| X Ratinio Barala R | Owner | p ^d | 11/24/15 |
|---|----------------------|----------------|-----------------|
| Signature of member or manager (Required) | Title (Required) | , is | Date (Required) |



THOMAS B. MILLER Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

BOB BROOKS Executive Director

December 1, 2015

TIENDA EL HARAGAN, LLC 901 FLEMING RD MAYSVILLE KY 41056

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **TIENDA EL HARAGAN**, **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,

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 0874754

