Organization ID # 0733892 State of origin KY Filing fee \$205.00 Alison Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Lunderga Reinsta		-	Alison Lundergan Grimes Kentucky Secretary of Sta Received and Filed: 1/21/2016 2:14 PM Fee Receipt: \$205.00	
Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490	Reinsta			1/21/2016 2:14 PM	
P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490		stamant Annlu		1/21/2016 2:14 PM	
1	O. Box 718 t, KY 40602-0718 D2) 564-3490			RST	
Exact limited liability company name and principal office a DIVISION THREE, LLC 11304 COX AVE LOUISVILLE KY 40223		al office address	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 filed online at <u>app.sos.ky.gov/ftsearch</u> or can be downloaded from our website.		_
Registered Agent and Registered	Office Address				
Joseph Gordon 11304 Cox Ave Louisville, KY 40223					
Members - List the name and address of the I LLCs are not required to list their members.	imited liability company	's members. If not specified, addre	esses default to the LLC's princip	al office address., Member-managed	
and a second s					
n an					
The above entity was administratively of 2010. The undersigned states that the satisfies the requirements of KRS 275.2 Under penalty of perjury, the below sign information pertaining to Division Three If not an officer of said entities become	grounds for disso 295. Enclosed is a ned hereby autho , LLC to the Secr	lution either did not exist of a check in the amount of rizes the Kentucky Depar etary of State, as required	or have been eliminated \$205.00, payable to Ken tment of Revenue to rele d for reinstatement pursu	, and the entity's name tucky State Treasurer. ease any applicable tax uant to KRS 271B.14-220.	
X mallford		managine me	m loom	theli	
Signature of member or manager (Requ	lired)	Title (Requ	uired)	Date (Required)	-
/					
		sector of a same of a sector o			

- The dependence - T



DANIEL P. BORK Commissioner

FINANCE AND ADMINISTRATION CABINET **DEPARTMENT OF REVENUE** OFFICE OF INCOME TAXATION

ELYSE WEIGEL **Deputy Commissioner**

BOB BROOKS Executive Director

January 21, 2016

Division Three, LLC 11304 Cox Ave Louisville KY 40223

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate Division Three, 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,

Jerry REV3782, Revenue Auditor I Pass Through Entity Branch 501 High Street, Mail Station 69 Frankfort, KY 40601 Phone: (502) 564-7370 Fax: (502) 564-3392

Kentucky Secretary of State organization number 0733892

