Organization ID # 1042306 State of origin KY Filing fee \$115.00 Mic	D # 1042306 KY       Commonwealth of Kentucky         15.00       Michael G. Adams, Secretary of State         Michael G. Adams, Secretary of State       Michael G. Adams         G. Adams ny of State       Reinstatement Application and         Box 718 Y 40602-0718       Reinstatement Annual Report For the year 2021       RST		Michael G. Adams Kentucky Secretary of State Received and Filed:	
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov			Fee Receipt: \$115.00	
Exact limited liability company name CENTER FOR SKIN & THYRO 218 SOUTH MAPLE WINCHESTER KY 40391	ID, PLLC o m fi	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>https:</u> <u>Nweb.sos.ky.gov\ftsearch</u> or can be downloaded		
Registered Agent and Registered Of MARVIN BISHOP, M.D., M.B.A 218 SOUTH MAPLE WINCHESTER, KY 40391 If the above company is included in a pare company's information here (optional): FEIN:Name:		rasuoskolary	, please provide the parent	

any's members. If not specified, addresses default to the LLC's principal office address.. Memi managed LLCs are not required to list their members.

The above entity was administratively dissolved on October 18, 2021 because the entity did not file its annual report for the year 2021. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 275.295. Enclosed is a check in the amount of \$115.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to CENTER FOR SKIN & THYROID, PLLC 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.

en 0 Signature of member O manager (Required) Title (Required) Date (Required)



## CENTER FOR SKIN & THYROID, PLLC 218 SOUTH MAPLE WINCHESTER KY 40391

Notice Date: December 20, 2021 KY SoS Org. ID: 1042306

RE:	Letter of Good Standing Request - Approved	
SUMMARY	You requested a letter of good standing, and your entity is in <b>good standing</b> with the Department of Revenue.	
OUR DETERMINATION	We verified the following information.	
	<ol> <li>You are registered with the Department of Revenue.</li> <li>An authorized person requested this letter.</li> <li>You filed income and LLE tax returns as required, or you are exempt from filing.</li> <li>You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.</li> <li>This notice will remain current for 30 days from the notice date above.</li> </ol>	
WHAT YOU NEED TO DO	<ol> <li>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.</li> <li>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.</li> <li>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.</li> </ol>	
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Megan REVY099, Taxpayer Services Specialist I Email: MeganD.Roberts@ky.gov Direct: 502-564-7310	