Mich	Commonwealth of Kentucky ael G. Adams, Secretary of St	LR 1185307 Michael G. Adams KY Secretary of State Received and Filed 2/22/2024 1:42:15 PM		
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Application Reinstatement Annual Re For the years 2023 through 202	port RST		
TRILOGY QUALITY ASSURANCE LIMITED LIABILITY COMPANY 31 WEST 4TH STREET MAYSVILLE KY 41056			e principal office address and register ent name/office address cannot be cha this form. When reinstating, you cannot dify the addresses until the reinstatemen d. Once the reinstatement is filed, the tement of change will be filed.	
cylotered Agent and Register	a Onice Address			
Amber Swan 31 West 4th Street Maysville, KY 41056	Se Onice Address			

The above entity was administratively dissolved on 10/4/2023 because the entity did not file its annual report for the year 2023. 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 14A.3-010; and that the entity has taken no steps to wind up and liquidate its business and affairs.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to Trilogy Quality Assurance Limited Liability Company to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Amber Swan Title: owner 2/22/2024



Trilogy Quality Assur 31 West 4th Street Maysville KY, 41056		e Limited Liability Company	Notice Date: KY SoS Org. ID:	February 22, 2024 1185307	
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	W 1.	e verified the following information. You are registered with the Departm	ent of Revenue.		
		<ol> <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> </ol>			
	Th	s notice will remain current for 30 day	s from the notice da	ate above.	
WHAT YOU NEED TO DO	1.	If you are attempting to reinstate of this letter to the Kentucky Secreta notice date above.			
	2. 3.	If you are a for-profit corporation Secretary of State a letter of good si Unemployment Insurance. Their tele	tanding from the Div phone number is 50 se remember to file ey General. The ch	ision of 02-564-6835. a copy of your arity filing	
CONTACT INFORMATION	If yo	you have any questions regarding this u.	notice, please cont	tact me. Thank	
		gent: James REVE277, Taxpayer Se mail: James.Sutherland@ky.gov irect: 502-564-7359	rvices Specialist III		