tsemones 0316110.09 Organization ID # 0316110 **Commonwealth of Kentucky** Michael G. Adams State of origin KY Michael G. Adams, Secretary of State Kentucky Secretary of State Filing fee \$130.00 Received and Filed: 3/18/2025 12:49 PM Fee Receipt: \$130.00 Michael G. Adams **Reinstatement Application and** Secretary of State RST P. O. Box 718 **Reinstatement Annual Report** Frankfort, KY 40602-0718 For the years 2023 through 2024 (502) 564-3490 http://www.sos.ky.gov Exact organization name and principal office address The principal office address and registered agent name/office address cannot be changed **ARTHROPLASTY FOUNDATION, INC.** on this form. When reinstating, you cannot 8620 BIGGIN HILL LANE modify the addresses until the reinstatement is 201 filed. Once the reinstatement is filed, the statement of change can be filed online at https:// LOUISVILLE KY 40220 web.sos.ky.gov/bussearchnprofile/search.aspx Registered Agent and Registered Office Address DONALD POMEROY, MD 8620 BIGGIN HILL LANE 201 LOUISVILLE, KY 40220 If the above company is included in a parent company's Kentucky tax return as a disregarded entity or a subsidiary, please provide the parent company's information here (optional): FEIN: Name: Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian CO0 JAN A EMPSON WALTER E BADENHAUSEN President

Directors - Non-profit corporations must have at least three (3) directors. All directors of the non-profit must be listed. If Not specified, director addresses default to the principal office address.

DONALD L POMEROY TYLER J KELLER

DONALD L POMEROY	 	· · ·		<u></u>
TYLER J KELLER	 ····			

The above entity was administratively dissolved on October 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 273.3181. Enclosed is a check in the amount of \$130.00, 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 ARTHROPLASTY FOUNDATION, INC. 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.

んひゅ Inclim Signature of officer or chairman of the board (Required) Title (Required) Date (Required)

NPRF

President

Vice President



ARTHROPLASTY FOUNDATION, INC. 8620 BIGGIN HILL LANE 201 LOUISVILLE KY, 40220

Notice Date: March 18, 2025 KY SoS Org. ID: 0316110

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. You are registered with the Department of Revenue. An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing. You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place. 	
WHAT YOU NEED TO DO	This notice will remain current for 30 days from the notice date above.	
AGENT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: James REVE277, Taxpayer Services Specialist III Email: James.Sutherland@ky.gov Direct: 502-564-7359	