Organization ID # 054601 State of origin   KY Filing fee \$115.00	<sup>4</sup> Commonwealt Michael G. Adams,	h of Kentucky Secretary of State	<b>0546014.09</b> Michael G. Adams Kentucky Secretary of State Received and Filed: 11/2/2022 1:04 PM Fee Receipt: \$115.00
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	8 Reinstateme	Reinstatement Application and Reinstatement Annual Report For the year 2022	
Exact organization name and FRASURE'S PERSO 1308 RIVERVIEW RC ASHLAND KY 41101	NAL CARE HOME, INC. DAD	name/office ad f <b>orm.</b> When reir addresses until reinstatement is filed online at <u>ht</u>	ffice address and registered agent dress cannot be changed on this nstating, you cannot modify the the reinstatement is filed. Once the filed, the statement of change can be tps:\web.sos.ky.gov\ftsearch or can from our website.
company's information here (optic FEIN: Name: Principal Officers - List the name	E DAD in a parent company's Kentucky tax return onal): me, address and title of all current officers. All org	panizations must list at least one (1) officer, ev	en 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
	LERIE FRASURE		,,,
		,	
Directors - List the name And added director addresses default to the principal VALERIE FRASURE	ress of all directors (if applicable).No listing of direct office address.	ctors is verification that the corporation has dis	spensed with directors. If Not specified,
<u></u>			· · · · · · · · · · · · · · · · · · ·
The undersigned states that th requirements of KRS 271B.14-	ratively dissolved on October 4, 2022 e grounds for dissolution either did no 210. Enclosed is a check in the amou elow signed hereby authorizes the Ke	ot exist or have been eliminated, ar int of \$115.00, payable to Kentuck	nd the entity's name satisfies the y State Treasurer.
information pertaining to FRAS pursuant to KRS 271B.14-220.	URE'S PERSONAL CARE HOME, IN	C. to the Secretary of State, as red	quired for reinstatement

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

× Caloria Frasure	President	10-31-22
Signature of officer Or chairman of the board (Required)	Title (Required)	Date (Required)



## FRASURE'S PERSONAL CARE HOME, INC. 1308 RIVERVIEW ROAD ASHLAND KY 41101

Notice Date: November 2, 2022 KY SoS Org. ID: 0546014

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: Bruce REV3968, Taxpayer Services Specialist II Direct: 502-564-2038		



## COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 <u>https://kewes.ky.gov</u> UITax@KY.GOV

Date: 11/02/2022

FRASURE'S PERSONAL CARE HOME, INC.

Dear Sir/Madam:

## KRS 14A.7-030(1)(f) CERTIFICATE

The Office of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Samantha Tabor Office of Unemployment Insurance PO Box 948 Frankfort, Kentucky 40602-0948 Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0546014

