Organization ID # 0603814 State of origin KY Filing fee \$115

Commonwealth of Kentucky Michael G. Adams, Secretary of St. KY Secretary of State

0603814 Michael G. Adams Received and Filed

11/26/2024 11:47:18 AM 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

Reinstatement Application and **Reinstatement Annual Report** For the year 2024

RST

Exact limited liability company name and principal office address

HOME REHAB ASSOCIATES, LLC 721 SOUTH 8TH STREET **SUITE A LOUISIVLLE KY 40203**

Registered Agent and Registered Office Address

MMLK, Inc. 201 East Main Street, Suite 900 Attn: Alan N. Linker Lexington, KY 40507

The principal office address and registered agent name/office address cannot be chang on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change will be filed.

Members - List the name And address of the limited liability company's members. If not specified, addresses default to the LLC's principal office addresses Member-managed LLCs are not required to list their members.

525 SCARBOROUGH ROAD, BRIARCLIFF MANOR, NEW YO CAROLE COLEMAN- FLORESTAL 10510 STEPHANIE JOHNSON 10527 SUGARBERRY STREET, WALDORF, MARYLAND 2060 2432 DEAR SPRINGS DRIVE, ELLENWOOD, GEORGIA 3029 STACY COLEMAN STARLET JOHNSON 313 OAK AVENUE, LAPLATA, MARYLAND 20646 BILLIE JO FLETCHER 5508 ROCK VALLEY WAY, LOUISVILLE, KENTUCKY 40241

Jefferson County: Business size: Small

Business type: Miscellaneous Services

The above entity was administratively dissolved on 10/12/2024 because the entity did not file its annual report for the year 2024. 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 HOME REHAB ASSOCIATES, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Alan N. Linker Title: Authorized Representative 11/26/2024

Website: www.revenue.ky.gov

HOME REHAB ASSOCIATES, LLC 721 SOUTH 8TH STREET SUITE A **LOUISIVLLE KY, 40203**

Notice Date: November 26, 2024

KY SoS Org. ID: 0603814

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.

- 1. You are registered with the Department of Revenue.
- 2. An authorized person requested this letter.
- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 4. You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.

This notice will remain current for 30 days from the notice date above.

- WHAT YOU NEED TO DO 1. 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.
 - 2. 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.
 - 3. 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.

AGENT INFORMATION

If you have any questions regarding this notice, please contact me. Thank you.

Agent: Megan REVY099, Taxpayer Services Specialist III

Email: MeganD.Roberts@ky.gov

Direct: 502-564-7310