Organization ID # State of origin Filing fee

0769718

Commonwealth of Kentucky \$115.00 Elaine N. Walker, Secretary of State 0769718.06

dcornish **LRPF** 

Elaine N. Walker, Secretary of State

Received and Filed: 10/20/2011 8:33 AM Fee Receipt: \$115.00

Elaine N. Walker 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 2011

**RST** 

Exact limited liability company name and principal office address

AMERICAN HOME DIALYSIS L.L.C. 7305 GRAND ISLE WAY PROSPECT KY 40059

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 app.sos.ky.gov/ftsearch or can be downloaded from our website.

## Registered Agent and Registered Office Address

Khurram Nazeer 7305 Grand Isle Way Prospect, KY 40059



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

JAI P. BHIMANI	13507 Ridgernoor	or prispectky 40059
Bhagwan BHIM ANI	13507 Ridgemoon R	~ prospert ky 40059
Khurram Nazeer	7305 Grand Isle w	ay posspect ky 40059

The above entity was administratively dissolved on September 9, 2011 because the entity did not file its annual report for the year 2011. 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 American Home Dialysis L. C. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

lease provide a Declaration of Power of Attorney with the Reinstatement Application. If not an officer of said ent Title (Required)



THOMAS B. MILLER
Commissioner

## FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

**ELYSE WEIGEL**Deputy Commissioner

**BOB BROOKS**Executive Director

October 20, 2011

AMERICAN HOME DIALYSIS L.L.C. 13507 RIDGEMOOR DR. PROSPECT KY 40059

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **American Home Dialysis L.L.C.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2010, and has paid the taxes shown to be due or assessed as of the date of this letter. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the limited liability company. This letter is valid for 30 days from the date of this letter.

Sincerely,

Frankie Eden, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-7394 FAX# 502-564-3392

Kentucky Secretary of State organization number 0769718

