

Organization ID # 0761323

State of origin KY

Filing fee \$130.00 Alison Lundergan Grimes, Secretary of S

Commonwealth of Kentucky

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Alison Lundergan Grimes
 Kentucky Secretary of State
 Received and Filed:
 6/20/2016 8:33 AM
 Fee Receipt: \$130.00

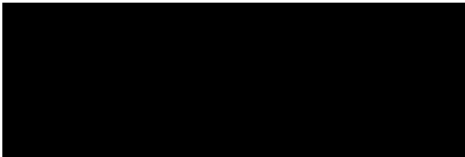
Alison Lundergan Grimes
 Secretary of State
 P. O. Box 718
 Frankfort, KY 40602-0718
 (502) 564-3490
 http://www.sos.ky.gov

Reinstatement Application and Reinstatement Annual Report For the years 2015 through 2016

Exact limited liability company name and principal office address

LESTER S. DUPLCHAN, M.D. PLLC
 350 THOMAS MORE PARKWAY
 SUITE 190
 CRESTVIEW HILLS KY 41017

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

Michael DeFrank
 250 Grandview Drive
 Suite 200
 Ft. Mitchell, KY 41017

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. Member-managed LLCs are not required to list their members.

LESTER S DUPLCHAN	

The above entity was administratively dissolved on September 12, 2015 because the entity did not maintain its registered agent or registered office address in this state for sixty (60) days or more. 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 \$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 Lester S. Duplechan, M.D. PLLC 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.

X _____ OWNER - MEMBER 6-9-16
 Signature of member or manager (Required) Title (Required) Date (Required)



DANIEL P. BORK
Commissioner

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

ELYSE WEIGEL
Deputy Commissioner

June 20, 2016

**Lester S. Duplechan, M.D. PLLC
350 THOMAS MORE PARKWAY
SUITE 190
CRESTVIEW HILLS KY 41017**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **Lester S. Duplechan, M.D. PLLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2014, 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,

Stephanie REVX219, Taxpayer Services Specialist I
Division of Corporation Tax
501 High Street, Mail Sta. 69
Frankfort, KY 40601
502-564-2028
FAX# 502-564-3392

Kentucky Secretary of State organization number 0761323