Organization ID # 0762023 State of origin

Commonwealth of Kentucky Filing fee \$115.00 Alison Lundergan Grimes, Secretary of Sta

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Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 10/11/2012 12:59 PM Fee Receipt: \$115.00

TOI

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

Reinstatement Application and Reinstatement Annual Report For the year 2012

Exact organization name and principal office address DENTAL ALHAMDOULILAHI, INC. **8124 DIANE DRIVE #9 FLORENCE KY 41042**

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

ISSA DIALLO 7529 SUSSEX DRIVE SUITE 200 FLORENCE, KY 41042



Principal Officers - L specified, officer addresses def	ist the name, address and title of ault to the principal office address.	Corporations are required	anizations must list at least one (1) of the list a Secretary or other officer s	erving as records custodian	
President	ISSA DIALLO		124 DIANE OR APTY 9		
Vice President			1560 Canterbury L		
Secretary	Abdoulage Di	ALLO	1522 Sussex DN#	C FORENCE, K	Y41342
Treasuret	Mauradon Ly	1807 SEBREE L	R ALT #4 FWRENCE	CE KY 41042	
Vice Treasurer Directors - Non-profit com office address.	Proposed THA porations must have at least three	(3) directors. All directors	489 LENOKE LN APP of the non-profit must be listed. If no	THE 3 FLOKEN CO t specified, director address	es default to the principal
ISSA 1	STALLO	board	DIRECTOR		
DUSMANE	SALL	Board	DIRECTOR		
ABDOULA	RE DIALLO	Board	HRECTOR		
MAMANO	u Ly	Board	DIRECTOR		
MoussA	THIAM	Board	BIRECTOR		

The above entity was administratively dissolved on September 11, 2012 because the entity did not file its annual report for the year 2012. 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 \$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 DENTAL ALHAMDOULILAHI, 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 Decla	aration of Power of Attorney with the Reinstatement Appl	ication.
X ISA Day by Mallo Signature of officer or chairman of the board (Required)	aration of Power of Attorney with the Reinstatement Appl PRESIDENT Title (Required)	10 - 08 - 12
Oignature of united of chairman of the board (required)	The (Negative)	2012 (1.104211.00)



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

October 11, 2012

DENTAL ALHAMDOULILAHI, INC. 8124 DIANE DRIVE #9 FLORENCE KY 41042

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **DENTAL ALHAMDOULILAHI, INC.** is exempt from filing a Kentucky Corporation Income Tax Return pursuant to KRS 141.040, KRS 141.0401 and KRS 136.070. This exemption does not apply to any other taxes administered by the Commonwealth of Kentucky. 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 corporation. This letter is valid for 30 days from the date of this letter.

Any changes in the corporation's articles of incorporation, by-laws, method of reporting, name or address, or ruling by the Internal Revenue Service must be reported to this office.

Sincerely,

Holly Hannis, Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7263 FAX# 502-564-0058

Kentucky Secretary of State organization number 0762023

