Organization ID # 0923923 - State of origin Filing fee \$145.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0923923.09

dwilliams **NPRF**

Michael G. Adams **Kentucky Secretary of State**

Received and Filed: 12/6/2021 1:11 PM Fee Receipt: \$145.00

RST

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 years 2019 through 2021

Exact organization name and principal office address KENTUCKY RECOVERY RESOURCE CENTER INC. 2501 W MARKET ST

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 **LOUISVILLE KY 40212** filed. Once the reinstatement is filed, the statement of change can be filed online at https: \web.sos.kv.gov\ffsearch or can be downloaded

Dogiotored Agent and D	legistered Office Address		
Registered Agent and N	legistered Office Address	MANBIO X	
2501 W MARKE	ELSI KOZO	N CIBRITIM	
LOUISVILLE, K	,		
•		cky tax return as a disregarded entity or a subsidia	rv. please provide the parent
company's information here		• • • • • • • • • • • • • • • • • • •	
FEIN: Nan	ne:		
Principal Officers - Lis	t the name, address and title of all cu	rrent officers. All organizations must list at least one (1) of	ficer, even in the case of a sole officer.
lf not specified, officer address President	es default to the principal office addres	s. Corporations are required to list a Secretary or other of	icer serving as records custodian
		TIBESON CHRIMINI	
	· · · · · · · · · · · · · · · · · · ·		
		· .	and the state of t
Directors - Non-profit corporate principal office address.	orations must have at least three (3) dire	ectors. All directors of the non-profit must be listed. If Not	specified, director addresses default to
AILEEN WALES	Steve Ba	emard	
RICHARD WILSON	NABAD	quess_	
ROGER REYNOLDS,	Mason	Horses	
		······································	
2019. The undersigned s	states that the grounds for diss	ober 16, 2019 because the entity did not file it olution either did not exist or have been elim is a check in the amount of \$145.00, payable	inated, and the entity's name
	KENTUCKY RECOVERY RES	orizes the Kentucky Department of Revenue to OURCE CENTER INC. to the Secretary of Sta	
Inot an officer of said of	/ ntity, please provide a Declarati	on of Power of Attorney with the Reinstateme	nt Application.
* Lastes	A relle	•	••
Signature of officer Or cha	irman of the board (Required)	Title (Required)	Date (Required)

Website: www.revenue.ky.gov Phone: 502-564-8139

December 6, 2021

0923923

Fax: 502-564-0058

KENTUCKY RECOVERY RESOURCE CENTER INC. 2501 W MARKET ST

LOUISVILLE KY 40212

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.

Notice Date:

KY SoS Org. ID:

OUR DETERMINATION

We verified the following information.

- 1. You are registered with the Department of Revenue.
- 2. An authorized person requested this letter.
- 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.

CONTACT INFORMATION

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

Agent: Tonja REV3883, Taxpayer Services Specialist II

Email: Tonja.Lilly@ky.gov Direct: 502-564-7289