anization ID # 1201025 e of origin KY ng fee \$115 Mic	Commonwealth of Kentucky hael G. Adams, Secretary of St	Received and	<b>y of State</b> Filed
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Application Reinstatement Annual Re For the year 2024	Fee receip	24 5:15:00 PM ot: \$115.00 <b>RST</b>
MOUNTAIN PROFESSIONAL SERVICES LLC age 925 DAWAHARE DRIVE mod HAZARD KY 41701		e principal office address and registered ent name/office address cannot be chan this form. When reinstating, you cannot bdify the addresses until the reinstatement d. Once the reinstatement is filed, the atement of change will be filed.	
MOUNTAIN PROFESS 925 DAWAHARE DRIV	IONAL SERVICES LLC on E file	this form. When odify the addresse ed. Once the reins	n reinstating, you cannot es until the reinstatemer tatement is filed, the
MOUNTAIN PROFESS 925 DAWAHARE DRIV	IONAL SERVICES LLC on E mo File sta	this form. When odify the addresse ed. Once the reins	n reinstating, you cannot as until the reinstatemen tatement is filed, the

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 MOUNTAIN PROFESSIONAL SERVICES LLC to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: BILL JOHNSON Title: OWNER 12/10/2024



## MOUNTAIN PROFESSIONAL SERVICES LLC 925 DAWAHARE DRIVE HAZARD KY, 41701

Notice Date: December 10, 2024 KY SoS Org. ID: 1201025

RE:	Letter of Good Standing Request - Approved	
SUMMARY	You requested a letter of good standing, and your entity is in <b>good standing</b> with the Department of Revenue.	
OUR DETERMINATION	We verified the following information.	
	<ol> <li>You are registered with the Department of Revenue.</li> <li>An authorized person requested this letter.</li> <li>You filed income and LLE tax returns as required, or you are exempt from filing.</li> <li>You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.</li> <li>This notice will remain current for 30 days from the notice date above.</li> </ol>	
WHAT YOU NEED TO DO	<ol> <li>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.</li> <li>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.</li> <li>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.</li> </ol>	
AGENT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: James REVE277, Taxpayer Services Specialist III Email: James.Sutherland@ky.gov Direct: 502-564-7359	