ganization ID # 12828 ate of origin KY ing fee \$115.00	Commonweal	Commonwealth of Kentucky hael G. Adams, Secretary of St Reinstatement Application- Reinstatement Annual Rep For the year 2024	
Michael G. Adan Secretary of Sta P. O. Box 718 Frankfort, KY 40602 (502) 564-3490 http://www.sos.ky.	e Reinstaten -0718 Reinstaten Fo		
A ROUND 4 RO 1034 CHERRYM INDEPENDENC	NOLL COURT E KY 41051 Registered Office Address	age on mod filed	e principal office address and registere ent name/office address cannot be char this form. When reinstating, you cannot dify the addresses until the reinstatement d. Once the reinstatement is filed, the rement of change will be filed.
	List the name, address and title of all current Iddresses default to the principal office address MICHAEL DANIELE	s. Corporations are required to list a Se	
Directors - Non-profit cor the principal office address. MICHAEL DANIELE BROOK DANIELE		. All directors of the non-profit must be RRYKNOLL COURT, IND	e listed. If Not specified, director address DEPENDENCE, KY 41051 DEPENDENCE, KY 41051
BECKY DANIELE			DEPENDENCE, KY 41051
County: Business size: Business type:	CAMPBELL Small Social Services	LA FALL OF	

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 A ROUND 4 ROBIN INC. to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Michael Daniele Title: President 11/16/2024



A ROUND 4 ROBIN INC. 1034 Cherryknoll Court Independence KY, 41051

Notice Date:	November 16, 2024
KY SoS Org. ID:	1282828

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	<ol> <li>We verified the following information.</li> <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> </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: Angie Morris Direct: 502-564-7327	