Organization ID # 1057531 State of origin KY Filing fee \$130.00

Michael G. Adams

Secretary of State

P. O. Box 718

Frankfort, KY 40602-0718

(502) 564-3490 http://www.sos.ky.gov

Commonwealth of Kentucky Michael G. Adams, Secretary of State

1057531.09

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Michael G. Adams Kentucky Secretary of State

Received and Filed: 4/17/2025 3:48 PM Fee Receipt: \$130.00

Reinstatement Application and Reinstatement Annual Report For the years 2024 through 2025

RST

Date (Required)

Exact o	rganization r	name and p	rincipal	office address	5
	THE LEGAC	Y GROUP	INCORP	ORATED	_
	1506 ATLAN	ITA CT			
	FLODENCE	177 440 40			

Signature of officer Or chairman of the board (Required)

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 https://web.sos.ky.gov/bussearchnprofile/search.aspx or can be

LONEROL	.101 -11942	filed online at https://web.sos.ky.gov/ bussearchnprofile/search.aspx or can be downloaded from our website.
GORDON M 1506 Atlanta Florence, K	a Ct Y 41042 s included in a parent company's Kentucky	tax return as a disregarde
Principal Officers specified, officer addresses	List the name, address and title of all current offi default to the principal office address. Corporations	cers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not are required to list a Secretary or other officer serving as records custodian
President	GORDON MCCOY	7101 Turfway Rd #213, Florence, KY 41022
Directors - List the nat director addresses default to	me And address of all directors (if applicable).No lis the principal office address.	iting of directors is verification that the corporation has dispensed with directors. If Not specified,
The undersigned stat	es that the grounds for dissolution eith	12, 2024 because the entity did not file its annual report for the year 2024. er did not exist or have been eliminated, and the entity's name satisfies the he amount of \$130.00, payable to Kentucky State Treasurer.
Under penalty of perj information pertaining 271B.14-220.	ury, the below signed hereby authorize g to The Legacy Group Incorporated to	s the Kentucky Department of Revenue to release any applicable tax o the Secretary of State, as required for reinstatement pursuant to KRS
f not an officer of sai	d entity, please provide a Declaration of	President Application.

Title (Required)

Website: www.revenue.ky.gov

The Legacy Group Incorporated 1506 Atlanta Ct Florence KY, 41042

Notice Date: April 17, 2025 KY SoS Org. ID: 1057531

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.

OUR DETERMINATION

We verified the following information.

- 1. You are registered with the Department of Revenue.
- 2. An authorized person requested this letter.
- 3. 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.

AGENT INFORMATION

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

Agent: Louis REV4836, Taxpayer Services Specialist I

Email: louis.szemethy@ky.gov

Direct: 502-564-2057



COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 https://kewes.ky.gov UITax@KY.GOV

Date: 04/17/2025	
The Legacy Group Incorporated	
Dear Sir/Madam:	

KRS 14A.7-030(1)(f) CERTIFICATE

The Office of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Samantha Tabor
Office of Unemployment Insurance
PO Box 948
Frankfort, Kentucky 40602-0948
Phone: (502) 564-2272
Email: UITax@KY.GOV

Kentucky Secretary of State organization number 1057531

