Organization ID # 0338833 State of origin

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

0338833.09

Alison Lundergan Grimes

Kentucky Secretary of State Received and Filed: 10/19/2016 1:39 PM Fee Receipt: \$115.00

Alison Lundergan Grimes 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 year 2016

Exact organization name and principal office address ELIZABETHTOWN HEARING AID CENTER, INC. 950 N MULBERRY ST STE 180 **ELIZABETHTOWN KY 42701**

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

GLENN COSSITT 950 N. MULBERRY STREET **ELIZABETHTOWN, KY 42701**



Sole Officer	GLENN COSSITT		
Secretary	GLENN COSSITT		
	name and address of all directors (if applica	ble).No listing of directors is verification that the corporation has	dispensed with directors. If not specified,
GLENN COSSITT			
The undersigned st	ates that the grounds for dissolut	October 1, 2016 because the entity did not file it tion either did not exist or have been eliminated, leck in the amount of \$115.00, payable to Kentu	, and the entity's name satisfies the
	ing to ELIZABETHTOWN HEARII	uthorizes the Kentucky Department of Revenue NG AID CENTER, INC. to the Secretary of State	
If not an officer of s	aid entity, please provide a Decla	aration of Power of Attorney with the Reinstatem	ent Application.
X Dles	r or chairman of the board (Required)	President Title (Required)	10 - 14 - 16 Date (Required)

Principal Officers . Liet the name address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

October 19, 2016

ELIZABETHTOWN HEARING AID CENTER, INC. 950 N MULBERRY ST STE 180 ELIZABETHTOWN KY 42701

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **ELIZABETHTOWN HEARING AID CENTER, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2015, and has paid the taxes shown to be due or assessed as of the date of this letter. 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.

Sincerely,

Lauren REV3934, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7253 FAX# 502-564-0058

Kentucky Secretary of State organization number 0338833





COMMONWEALTH OF KENTUCKY DIVISION OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH **EMPLOYER STATUS SECTION** 275 E MAIN ST, 2-EH FRANKFORT, KY 40621-0001 (502) 564-2272 https://kewes.ky.gov DES.UIT@KY.GOV

Date: 10/19/2016

ELIZABETHTOWN HEARING AID CENTER, INC.

Dear Sir/Madam:

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

The Division 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,

Chad Atha Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621

Phone: (502) 564-2272

Kentucky Secretary of State organization number 0338833

