Organization ID # 0779333
State of origin KY
Filing fee \$160.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0779333.09

Fee Receipt: \$160.00

Bdennis PRPF

Michael G. Adams Kentucky Secretary of State Received and Filed: 9/23/2020 10:29 AM

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 2017 through 2020

RST

Exact organization name and principal office address
YOUR NEXT STEP, INC.
437 EDGEWATER FOREST ROAD
CORBIN KY 40701

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		FEIN (Ontional)			
	AYNE FRAZIER					
	WATER FOREST ROAD		un selek			
CORBIN, I					nnt	
ompany's informatio	is included in a parent company's Kentucl	ky tax return as a	disregard		ent	
FEIN:					•	
Principal Officers specified, officer addresse	5 - List the name, address and title of all current of a default to the principal office address. Corporation	officers. All organizations are required to list	ons must list at least or a Secretary or other of	ne (1) officer, even in the case of ficer serving as records custodia	a sole officer. If not	
President	LESLIE WAYNE FRAZIER					
Sole Officer	LESLIE WAYNE FRAZIER	100				
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	and the second s					
		1 7 7 7				
	name And address of all directors (if applicable) No	listing of directors Is	verification that the co	rporation has dispensed with dire	ectors. If Not specified,	
director addresses default	to the principal office address.					
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		#7	· · · · · · · · · · · · · · · · · · ·			
	The state of the s					
The above entity wa	as administratively dissolved on Octob	er 9 2017 hecs	use the entity dic	I not file its annual renor	for the year 2017	
The undersigned st	ates that the grounds for dissolution ei	ther did not exis	st or have been e	liminated, and the entity	s name satisfies the	
requirements of KR	S 271B.14-210. Enclosed is a check in	the amount of	\$160.00, payable	e to Kentucky State Trea	surer.	
Under penalty of peinformation pertaini 271B.14-220.	rjury, the below signed hereby authoring to YOUR NEXT STEP, INC. to the	zes the Kentuck Secretary of Sta	y Department of ite, as required fo	Revenue to release any or reinstatement pursuan	applicable tax t to KRS	
If not an officer of s	aid entity) please provide a Declaration	n of Power of Al	torney with the R	einstatement Application).	
X Dusli	W. XD922	Para.	dent k	(E/Z)	1-15.202C	

Signature of officer Or chairman of the board (Required)

Title (Required)

Date (Required)

www.revenue.ky.gov Website: Phone: 502-564-8139 Fax: 502-564-0058

YOUR NEXT STEP, INC. 437 EDGEWATER FOREST ROAD CORBIN KY 40701

Notice Date: September 22, 2020

KY SoS Org. ID: 0779333

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.

An authorized person requested this letter.

3. You filed income and LLE tax returns as required, or you are exempt from

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
 - 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: Megan REVY099, Taxpayer Services Specialist I

Email: MeganD.Roberts@ky.gov

Direct: 502-564-7310



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: 09/22/2020	
YOUR NEXT STEP, INC.	
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,

Richard Lemay
Office of Unemployment Insurance
PO Box 948
Frankfort, Kentucky 40602-0948
Phone: (502) 564, 2272

Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0779333

