ganization ID # 06846 ite of origin KY ng fee \$145	Commonwealth of Kentuc Michael G. Adams, Secretary o	Michael G Adams
Michael G. Adam Secretary of Stat P. O. Box 718 Frankfort, KY 40602 (502) 564-3490 http://www.sos.ky.	Reinstatement Applica Reinstatement Annua For the years 2023 throug	I Report RST
address OLDHAM COUI 301 S. 1ST STF LAGRANGE KY Registered Agent and LIDO L. PETRU 301 S. 1ST STF LAGRANGE, KY Principal Officers - L	7 40031 <u>Registered Office Address</u> CCI REET Y 40031 ist the name, address and title of all current of ficers. All organizations mu	The principal office address and registere agent name/office address cannot be chan on this form. When reinstating, you cannot modify the addresses until the reinstatement filed. Once the reinstatement is filed, the statement of change will be filed.
officer. If not specified, officer a Sole Officer	Image: Libor L. PETRUCCI 301 S 1ST ST	to list a Secretary or other officer serving as record REET, LAGRANGE, KY 40031
specified, director addresses defa	And address of all directors (if applicable).No listing of directors Is verificated ault to the principal office address.	
LIDO L. PETRUCCI	301 S 1ST STREET, LAGRA	
LIDO L. PETRUCCI	name and address of the corporation's shareholders. If not specified, shareholders, and address of the corporation's shareholders. If not specified, shareholders, and address of the corporation's shareholders. If not specified, shareholders, and address of the corporation's shareholders. If not specified, shareholders, and address of the corporation's shareholders. If not specified, shareholders, and address of the corporation's shareholders. If not specified, shareholders, and address of the corporation's shareholders. If not specified, shareholders, and address of the corporation's shareholders. If not specified, shareholders, and address of the corporation's shareholders. If not specified, shareholders, and address of the corporation's shareholders. If not specified, shareholders, and address of the corporation's shareholders. If not specified, shareholders, and address of the corporation's shareholders, and address of the corporation's shareholders. If not specified, shareholders, address of the corporation's shareholders, address of the	
County: Business size: Business type:	Oldham Small Health Services	

The above entity was administratively dissolved on 10/4/2023 because the entity did not file its annual report for the year 2023. 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 OLDHAM COUNTY SPINE & DISC CENTER, PSC to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Lido Petrucci Title: President 1/3/2025

Certificate of Professional Service Corporation

I, president of said corporation, certify that all the shareholders, Not less than half of the directors, And all officers other than secretary And treasurer of the professional service corporation are duly qualified as provided in KRS Chapter 274 And a copy of such annual report has been filed with the regulating board that licenses the shareholders described in this certificate. I hereby certify that I am authorized to submit this annual report, And I declare under penalty of perjury under the laws of Kentucky that the forgoing Is true And correct as of today.



OLDHAM COUNTY SPINE & DISC CENTER, PSC 301 S. 1ST STREET LAGRANGE KY, 40031

Notice Date: January 3, 2025 KY SoS Org. ID: 0684636

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.	
	 You are registered with the Department of Revenue. An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing. 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	 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. 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. 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: Dottye REV3769, Taxpayer Specialist III Email: Dottye.Roberts@ky.gov Direct: 502-564-0102	



COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

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

Date: 01/03/2025

OLDHAM COUNTY SPINE & DISC CENTER, PSC

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 0684636

