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**Alison Lundergan Grimes**  
**Kentucky Secretary of State**  
 Received and Filed:  
 10/20/2014 9:40 AM  
 Fee Receipt: \$115.00

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**Organization ID # 0730137**  
**State of origin KY**  
**Filing fee \$115.00 Alison Lundergan Grime**

**Commonwealth**

Alison Lundergan Grimes  
 Secretary of State  
 P. O. Box 718  
 Frankfort, KY 40602-0718  
 (502) 564-3490  
<http://www.sos.ky.gov>

**Reinstatement**  
**Reinstatement**

**Exact limited liability company name and principal office address**

**HEALTH FUSION LLC**  
**3 SPRUCE DR.**  
**FLORENCE KY 41042**

**Registered Agent and Registered Office Address**

Jim Rocco Ferreri  
 3 Spruce DR.  
 Florence, KY 41042

**Members** - List the name and address of the limited liability company's members. If not sp  
LLCs are not required to list their members.

Jim Rocco Ferreri Owner  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The above entity was administratively dissolved on September 30, 2014 2014. The undersigned states that the grounds for dissolution either did satisfies the requirements of KRS 275.295. Enclosed is a check in the a

Under penalty of perjury, the below signed hereby authorizes the Kentu information pertaining to Health Fusion LLC to the Secretary of State, a:

If not an officer of said entity, please provide a Declaration of Power of /

**X** Jim Rocco Ferreri owner  
 Signature of member or manager (Required)



**THOMAS B. MILLER**  
Commissioner

**FINANCE AND ADMINISTRATION CABINET  
DEPARTMENT OF REVENUE  
OFFICE OF INCOME TAXATION**

**ELYSE WEIGEL**  
Deputy Commissioner

**BOB BROOKS**  
Executive Director

October 17, 2014

**Health Fusion LLC  
3 Spruce DR.  
Florence KY 41042**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **Health Fusion LLC** has filed Kentucky Income Tax Returns through the tax year ended December 31, 2012, 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 limited liability company. This letter is valid for 30 days from the date of this letter.

Sincerely,

Gary REV1282, Revenue Program Officer  
Division of Corporation Tax  
501 High Street, Mail Sta.52  
Frankfort, KY 40601  
502-564-7281  
FAX# 502-564-0058

Kentucky Secretary of State organization number 0730137