Organization ID # 1058640 Commonwealth of Kentucky State of origin KY Filing fee \$115.00 Michael G. Adams, Secretary of Stat		Michael G. Adams Kentucky Secretary of State
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Applicatio Reinstatement Annual Re For the year 2021	
Exact limited liability company nam ARMES FAMILY CHIROPRA 1093 SOUTH HIGHWAY 261 HARDINSBURG KY 40143	ACTIC, LLC f	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 <u>https:/web.sos.ky.gov/ifsearch</u> or can be downloaded from our website.
		FEIN (Optional)
	ne limited liability company's members. If not specified, addresses defaul	ult to the LLC's principal office address Member-managed

The above entity was administratively dissolved on October 18, 2021 because the entity did not file its annual report for the year 2021. 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 275.295. Enclosed is a check in the amount of \$115.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to ARMES FAMILY CHIROPRACTIC, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

X Rine T. Cames	Owner/Chairman	12-9-21
Signature of member Or manager (Required)	/ Title (Required)	Date (Required)



ARMES FAMILY CHIROPRACTIC, LLC 1093 SOUTH HIGHWAY 261 HARDINSBURG KY 40143

Notice Date:December 14, 2021KY SoS Org. ID:1058640

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.
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Cory REV4079, Revenue Auditor I Email: Cory.Johnson@ky.gov Direct: (502) 564-7370