

Organization ID # 0500941
State of origin KY
Filing fee \$115.00

Commonwealth of Kentucky
Trey Grayson, Secretary of State

0500941.06 cchaney
LRPF
Trey Grayson, Secretary of State
Received and Filed:
11/18/2010 7:44 AM
Fee Receipt: \$115.00

Trey Grayson
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 2010

RST

Exact limited liability company name and principal office address

SCOTT COUNTY PHYSICAL THERAPY LLC
208 BEVINS LANE
SUITE F
GEORGETOWN KY 40324

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

EDDIE LYNN REEVES II
208 BEVINS LANE
SUITE F
GEORGETOWN, KY 40324

Managers - List the name and address of the limited liability company's managers. The annual report will be returned if business addresses are not listed.

EDDIE LYNN REEVES II
ARTHUR S MORVAI

The above entity was administratively dissolved on November 2, 2010 because the entity did not file its annual report for the year 2010. 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 SCOTT COUNTY PHYSICAL THERAPY 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 [Signature] Member - Co-owner 11/11/10
Signature of member or manager (Required) Title (Required) Date (Required)



THOMAS B. MILLER
Commissioner

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

ELYSE WEIGEL
Deputy Commissioner

DON RICHARDSON
Executive Director

November 17, 2010

**SCOTT COUNTY PHYSICAL THERAPY LLC
208 BEVINS LANE
SUITE F
GEORGETOWN KY 40324**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **SCOTT COUNTY PHYSICAL THERAPY LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2009, 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,

Mary Jo Brown, Revenue Auditor
Division of Corporation Tax
501 High Street, 7th Floor, Sta. 52
Frankfort, KY 40601
502-564-7317
FAX# 502-564-0058

Kentucky Secretary of State organization number 0500941