			0196147.09	vmil PRI
Organization ID # 0196147 State of origin KY Filing fee \$115.00 <b>Aliso</b>	Commonwealth of Ken on Lundergan Grimes, Sec	-	Alison Lundergan Grimes Kentucky Secretary of Star Received and Filed: 12/2/2019 5:32 PM Fee Receipt: \$115.00	
Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Applic Reinstatement Annua For the year 2019	al Report	RST	
Exact professional service corpo A. GLENN CATLETT, M.I 207 WEST MAIN ST. HODGENVILLE KY 4274	-	name/office address form. When reinstatin addresses until the rei reinstatement is filed,	ddress and registered agent cannot be changed on this g, you cannot modify the nstatement is filed. Once the the statement of change can be <u>.ky.gov/ffsearch</u> or can be vebsite.	·
Registered Agent and Registered A. GLENN CATLETT, M.D 207 WEST MAIN ST. HODGENVILLE, KY 4274 If the above company is included in a p company's information here (optional): FEIN: Name:	). 8 parent company's Kentucky tax return as a disregarde	d e		
Principal Officers - List the name, an	ddress and title of all current officers. All organizations must list			
	ipal office address. Corporations are required to list a Secretary o			
	<u> </u>			
Directors - List the name And address of director addresses default to the principal office	of all directors (if applicable).No listing of directors Is verification the address.	nat the corporation has dispense	ed with directors. If Not specified,	
		<u></u>		
Shareholders - List the name and add	ress of the corporation's shareholders. If not specified, sharehold	er addresses default to the prin	cipal office address.	
A GLENN CATLETT GEORGIANNA H CATLETT	`	·		
The undersigned states that the group	ely dissolved on October 16, 2019 because the e ounds for dissolution either did not exist or have Enclosed is a check in the amount of \$115.00, j	been eliminated, and th	e entity's name satisfies the	
Under penalty of perjury, the below	signed hereby authorizes the Kentucky Departm I CATLETT, M.D., P.S.C. to the Secretary of Stat	nent of Revenue to relea	ase any applicable tax	
If not an officer of said entity, plaas	e provide a Declaration of Power of Attorney with	n the Reinstatement Ap	plication.	

X A glum Cat 5	President	11-8-19
Signature of officer Or chairman of the board (Required)	Title (Required)	Date (Required)

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.

ler PF



## 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: 11/27/2019

A. GLENN CATLETT, M.D., P.S.C.

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 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0196147





## A. GLENN CATLETT, M.D., P.S.C. 2117 OLD SONORA ROAD HODGENVILLE KY 42748

Notice Date: November 27, 2019 KY SoS Org. ID: 0196147

RE:	Letter of Good Standing Request - Approved	
SUMMARY	You requested a letter of good standing, and your entity is in <b>good standing</b> with the Department of Revenue.	
OUR DETERMINATION	<b>DN</b> We verified the following information.	
	<ol> <li>You are registered with the Department of Revenue.</li> <li>An authorized person requested this letter.</li> <li>You filed income and LLE tax returns as required, or you are exempt from filing.</li> <li>You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.</li> <li>This notice will remain current for 30 days from the notice date above.</li> </ol>	
WHAT YOU NEED TO DO	<ol> <li>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.</li> <li>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.</li> <li>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.</li> </ol>	
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Tonja REV3883, Taxpayer Services Specialist I Email: Tonja.Lilly@ky.gov Direct: 502-564-7289	