#### Organization ID # 0454251 State of origin KY **Commonwealth of Kentucky** 0454251 Filing fee \$130 Michael G. Adams Michael G. Adams, Secretary of St Ky Secretary of State Received and Filed 2/14/2025 11:08:45 AM Michael G. Adams Fee receipt: \$130.00 **Reinstatement Application** and Secretary of State RST P. O. Box 718 **Reinstatement Annual Report** Frankfort, KY 40602-0718 For the years 2024 through 2025 (502) 564-3490 http://www.sos.ky.gov Exact professional service corporation name and principal office The principal office address and registered agent name/office address cannot be chang address on this form. When reinstating, you cannot DR. MICHAEL K. REDMAN, P.S.C. modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the 7276 BURLINGTON PIKE, statement of change will be filed. FLORENCE, KY 41042 Registered Agent and Registered Office Address MICHAEL K REDMAN 7276 BURLINGTON PIKE, FLORENCE,, KY 41042 Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records President MICHAEL REDMAN 7276 BURLINGTON PIKE FLORENCE KY 4104; Shareholders - List the name and address of the corporation's shareholders. If not specified, shareholder addresses default to the principal office ad

 County:
 Boone

 Business size:
 Small

 Business type:
 Health Services

7276 BURLINGTON PIKE, FLORENCE, KY 41042

The above entity was administratively dissolved on 10/12/2024 because the entity did not file its annual report for the year 2024. 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 14A3-010; 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 DR. MICHAEL K. REDMAN, P.S.C. to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

## Signature of Authorized Representative: Dr. Michael Redman Title: Owner 2/14/2025

MICHAEL KEMBLIN REDMAN

#### 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.



### 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: 02/14/2025

DR. MICHAEL K. REDMAN, 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,

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 0454251





DR. MICHAEL K. REDMAN, P.S.C. 7276 BURLINGTON PIKE, FLORENCE, KY, 41042 Notice Date: February 14, 2025 KY SoS Org. ID: 0454251

<i>RE:</i>	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	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>
AGENT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Louis REV4836, Taxpayer Services Specialist I Email: louis.szemethy@ky.gov Direct: 502-564-2057