Organization ID # 0779151 State of origin

http://www.sos.ky.gov

Commonwealth of Kentucky Filing fee \$115.00 Alison Lundergan Grimes, Secretary of S

0779151.09

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Alison Lundergan Grimes

Kentucky Secretary of State Received and Filed: 11/7/2016 2:11 PM Fee Receipt: \$115.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490

Reinstatement Application and **Reinstatement Annual Report** For the year 2016

K31

Exact organization name and principal office address TRANSFORMATION PERSONAL TRAINING, INC. 1128 IRON LANE COURT **LEXINGTON KY 40509**

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

JOSH MILLER 1128 IRON LANE COURT LEXINGTON, KY 40509



specified, officer address	ses default to the principal office add	ress. Corporations are requir	ed to list a Secretary or o	other officer serving a	s records custodian	
President	JOSH MILLER				Lexington, Ky 40509	
Directors lister		if on Early N. Early of the		4		
	name and address of all directors (It to the principal office address.	ir applicable). No listing of dir	ectors is vernication that	the corporation has d	iispensed with directors. (not specified,
JOSH MILLER		1138 In	on Lace Ct	lexingto.	A Ky YOSTG	
The undersigned s	vas administratively dissolve states that the grounds for c RS 271B.14-210. Enclosed	lissolution either did r	not exist or have be	een eliminated, a	and the entity's nan	ne satisfies the
Under penalty of p information pertain pursuant to KRS 2	erjury, the below signed he hing to TRANSFORMATION 71B.14-220.	reby authorizes the K I PERSONAL TRAIN	entucky Departme NG, INC. to the Se	ent of Revenue to ecretary of State	o release any appli , as required for rei	cable tax instatement
If not an officer of	said entity, please provide a	a Declaration of Powe	er of Attorney with t	the Reinstateme	nt Application.	
X A	h Miller	0	wee/ period	ut		4-16 (Bassima)

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 sole officer. If not



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

November 7, 2016

TRANSFORMATION PERSONAL TRAINING, INC. 1128 IRON LANE COURT LEXINGTON KY 40509

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **TRANSFORMATION PERSONAL TRAINING**, **INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2015, 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 corporation. This letter is valid for 30 days from the date of this letter.

Sincerely,

Theresa REV0868, Taxpayer Services Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7288 FAX# 502-564-0058

Kentucky Secretary of State organization number 0779151





COMMONWEALTH OF KENTUCKY DIVISION OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH **EMPLOYER STATUS SECTION** 275 E MAIN ST, 2-EH FRANKFORT, KY 40621-0001 (502) 564-2272 https://kewes.ky.gov DES.UIT@KY.GOV

Date: 11/07/2016

TRANSFORMATION PERSONAL TRAINING, INC.

Dear Sir/Madam:

KRS 14A.7-030(1)(f) CERTIFICATE

The Division 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 Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0779151

