Organization ID# 0758157 State of origin

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

0758157.06

dcornish **LRPF** 

Alison Lundergan Grimes **Kentucky Secretary of State** 

Received and Filed: 9/18/2012 10:04 AM Fee Receipt: \$115.00

**RST** 

Alison Lundergan Grimes 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 2012

Exact limited liability company name and principal office address **NEWLAND SPEECH THERAPY SERVICES LLC 4809 AGAPE DRIVE LEXINGTON KY 40514** 

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

Kara Nicole Newland 4809 Agape Drive Lexington, KY 40514



anagers - List the name and address of the limited liability company's managers, if not specified, addresses default to the LLC's principal office address.
ARA NICOLE NEWLAND
ne above entity was administratively dissolved on September 11, 2012 because the entity did not file its annual report for the year 112. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name tisfies the requirements of KRS 275.295. Enclosed is a check in the amount of \$115.00, payable to Kentucky State Treasurer.
nder penalty of perjuny, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax formation pertaining to Newland Speech Therapy Services LLC to the Secretary of State, as required for reinstatement pursuant to RS 271B <sub>1</sub> 14-220.
not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.
Margon 9/14/12
/ Signature of member or manager (Required) / Date (Required) / Date (Required)



THOMAS B. MILLER
Commissioner

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

**ELYSE WEIGEL**Deputy Commissioner

BOB BROOKS
Executive Director

September 18, 2012

Newland Speech Therapy Services LLC 4809 Agape Drive Lexington KY 40514

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **Newland Speech Therapy Services LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2011, 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,

Frankie Eden, Revenue Auditor II Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-7394 FAX# 502-564-3392

Kentucky Secretary of State organization number 0758157

