Organization ID # 0646963 State of origin KY Filing fee \$115.00 Aliso i	0646963.06 bsche LRPF Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 9/24/2012 3:06 PM					
Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Annu	einstatement Application and Reinstatement Annual Report For the year 2012				
Exact limited liability company name and principal office address SHOAIB NEUROLOGICAL SERVICES, P.L.L.C. SUITE 112 1239 WOODLAND DRIVE ELIZABETHTOWN KY 42701		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 <u>app.sos.ky.gov/ftsearch</u> or can be downloaded from our website.				
Registered Agent and Registere JAMES T. KELLEY 115 W. POPLAR STREE ELIZABETHTOWN, KY 4	r 2701	i - Mar				
Members - List the name and address Of Member-managed LLCs are not required to list th	the limited liability company's members. If n leir members.	ot specified, addresses default to	the LLC's principal office	address		
MUHAMMAD A SHOAIB	1239 WOODLAND DRIVE SUITE 112, EL	VOODLAND DRIVE SUITE 112, ELIZABETHTOWN, KY 42701				

The above entity was administratively dissolved on September 11, 2012 because the entity did not file its annual report for the year 2012. 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 SHOAIB NEUROLOGICAL SERVICES, P.L.L.C. 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	thoot	MEMBER		 09/17/2012
	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

BOB BROOKS Executive Director

September 24, 2012

SHOAIB NEUROLOGICAL SERVICES, P.L.L.C. SUITE 112 1239 WOODLAND DRIVE ELIZABETHTOWN KY 42701

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **SHOAIB NEUROLOGICAL SERVICES**, **P.L.L.C.** has filed Kentucky Income Tax Returns through the tax year ended 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,

James Sutherland, Revenue Program Officer Pass Through Entity Branch 501 High Street, Mail Station 69 Frankfort, KY 40601 Phone: (502) 564-7359 Fax: (502) 564-3392

Kentucky Secretary of State organization number 0646963

