Organization 1D # 1055463 Commonwealth of Kentucky State of origin KY Michael G. Adams, Secretary of State					1055463.06 Michael G. Adams Kentucky Secretary of State Received and Filed:			
Michael G. Adams Secretary of State	Reins	pplicatio	ication and		12/7/2020 6:38 AM Fee Receipt: \$115.00			
P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	<b>Reinstatement Annual Report</b> For the year 2020				RS	r 		
Exact limited liability company name and principal office address AFFORDABLE DENTURES & IMPLANTS-KENTUCKY, PLLC 213 NORTH BROADWAY STREET CHECOTAH OK 74426					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 Registered CT CORPORATION SYSTE 306 WEST MAIN STREET SUITE 512 FRANKFORT, KY 40601 If the above company is included in a pa company's information here (optional); FEIN: Name: Managers - List the name And address.of	EM arent company's Ke		disregarde	FFIN (Ontional states of the s		iress.	ht .	
Anthony Naranja, DDS		7 Jordan Drive, Suite						
	<u></u>		<u> </u>					
۲۰۰۱ - ۲۰۰۳ ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲ ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ -				(d. 1.)				
The above entity was administrative The undersigned states that the group requirements of KRS 275.295. Enclo	unds for dissolution	n either did not exist	f or have been e	l not file its a liminated, an	d the entity's	or the year name satis	2020. fies the	
Under penalty of perjury, the belows information pertaining to AFFORDAU reinstatement pursuant to KRS 271E	signed hereby aut BLE DENTURES	horizes the Kentuck	/ Department of	Revenue to	release any a	pplicable ta required fo	ax r	
If not an officer of said entity, please	provide a Declar	ation of Power of Att	orney with the R	einstatemen	Application.			
X Anthony Naranja		Mana	ager		1	1/17/20		
Signature of member Or manager (F	Required)		Title (Required)			Date (Required	i)	

•

Allong magazarar 147

-4

1.00



AFFORDABLE DENTURES & IMPLANTS-KENTUCKY, Notice Date: December 1, 2020 PLLC KY SoS Org. ID: 1055463 467 Jordan Drive Suite 105 Paducah KY 42001						
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	<ol> <li>We verified the following information.</li> <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: Dottye REV3769, Taxpayer Specialist I Email: Dottye.Roberts@ky.gov Direct: 502-564-0102					