Organization ID # 1072764 State of origin Filing fee \$115.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

1072764.09

dwilliams

Michael G. Adams **Kentucky Secretary of State**

Received and Filed: 12/22/2020 3:50 PM Fee Receipt: \$115.00

Michael G. Adams 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 2020

ı	V	

Date (Required)

Exact organization name and principal office address ANDREWS PACKAGING PHARMACY, INC. 17111 DRY RIDGE RD **LOUISVILLE KY 40299**

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	FEIN (Optional)
Matthew Andrews	7
17111 Dry Ridge Rd	
Louisville, KY 40299	<u> </u>
If the above company is included in a parent company's Kentucky tax	return as a disregard
company's information here (optional):	and the second s
FEIN: Name:	
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
specified, officer addresses default to the principal office address. Corporations are re	equired to list a Secretary or other officer serving as records custodian
President Mothew Andrews	
Vice-President Morgan Andrews	
Secretary Moran Andrews	
Treasurer MOHAR JAMIRIUS	
director addresses default to the principal office address.	
The above entity was administratively dissolved on October 8, 2. The undersigned states that the grounds for dissolution either drequirements of KRS 271B.14-210. Enclosed is a check in the a	2020 because the entity did not file its annual report for the year 2020. id not exist or have been eliminated, and the entity's name satisfies the amount of \$115.00, payable to Kentucky State Treasurer.
Under penalty of perjury, the below signed hereby authorizes the information pertaining to Andrews Packaging Pharmacy, Inc. to 271B.14-220.	e Kentucky Department of Revenue to release any applicable tax the Secretary of State, as required for reinstatement pursuant to KRS
If not an official efficiency said entity, please provide a Declaration of Po	ower of Attorney with the Reinstatement Application.
X 11000 K. When	tresident 12420
Signature of officer Or chairman of the board (Required)	Title (Required) Date (Required)

Title (Required)



www.revenue.ky.gov Website: Phone: 502-564-8139 Fax: 502-564-0058

Andrews Packaging Pharmacy, Inc. 17111 Dry Ridge Rd Louisville KY 40299

Notice Date:

December 22, 2020

KY SoS Org. ID: 1072764

RE: Letter of Good Standing Request - Approved

SUMMARY You requested a letter of good standing, and your entity is in **good**

standing with the Department of Revenue.

OUR DETERMINATION We verified the following information.

1. You are registered with the Department of Revenue.

An authorized person requested this letter.

3. You filed income and LLE tax returns as required, or you are exempt from

4. You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.

This notice will remain current for 30 days from the notice date above.

- WHAT YOU NEED TO DO 1. 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
 - 2. 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.
 - 3. 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.

CONTACT INFORMATION

If you have any questions regarding this notice, please contact me. Thank you.

Agent: Bruce REV3968, Taxpayer Services Specialist II

Direct: 502-564-2038



COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 https://kewes.ky.gov UITax@KY.GOV

Date: 12/22/2020	
Andrews Packaging Pharmacy, Inc	
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,

Richard Lemay
Office of Unemployment Insurance
PO Box 948
Frankfort, Kentucky 40602-0948
Phone: (502) 564-2272

Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 1072764

