## Organization ID # 1205666 State of origin KY **Commonwealth of Kentucky** 1205666 Filing fee \$115.00 Michael G. Adams Michael G. Adams, Secretary of St **KY Secretary of State** Received and Filed 10/26/2023 11:06:54 AM Michael G. Adams Fee receipt: \$115.00 Reinstatement Application and Secretary of State RST P. O. Box 718 **Reinstatement Annual Report** Frankfort, KY 40602-0718 For the year 2023 (502) 564-3490 http://www.sos.ky.gov Exact limited liability company name and principal office address The principal office address and registered agent name/office address cannot be chang **BRUCE KOFFLER MD LLC**

Registered Agent and Registered Office Address

Bruce Koffler 3424 Briercroft Way Lexington, KY 40509

3424 BRIERCROFT WAY

**LEXINGTON KY 40509** 

agent name/office address cannot be chan; on this form. When reinstating, you cannot modify the addresses until the reinstatement i filed. Once the reinstatement is filed, the statement of change will be filed.

**Members** - List the name And address of the limited liability company's members. If not specified, addresses default to the LLC's principal office addresses Member-managed LLCs are not required to list their members.

BRUCE HARVEY KOFFLER

3424 BRIERCROFT WAY, LEXINGTON, KY 40509

The above entity was administratively dissolved on 10/4/2023 because the entity did not file its annual report for the year 2023. 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 14A.3-010; and that the entity has taken no steps to wind up and liquidate its business and affairs.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to Bruce Koffler MD LLC to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Bruce Koffler, MD Title: President 10/26/2023



Bruce Koffler MD LLC 3424 Briercroft Way Lexington KY, 40509

Notice Date:	October 26, 2023
KY SoS Org. ID:	1205666

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: Angie Morris Direct: 502-564-7327