State of origin KV	Commonwealth of Kentuc ael G. Adams, Secretary o	-		glowe NPRF
Michael G. Adams Secretary of State	Reinstatement Application	on and	Fee Receipt: \$130.00	
P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 <u>http://www.sos.ky.gov</u>	Reinstatement Annual R For the years 2021 through	eport	RST	,
Exact organization name and principal offic FARMDALE ADULT CITIZENS TO 795 RIDGE LAKE BLVD., SUITE 30 MEMPHIS, TN 38120	VER II, INC.	agent name/off on this form. W modify the addre filed. Once the re statement of cha	ffice address and registered ice address cannot be changed hen reinstating, you cannot esses until the reinstatement is einstatement is filed, the inge can be filed online at <u>https:</u> <u>vlftsearch</u> or can be downloaded	
Registered Agent and Registered Office A CORPORATION SERVICE COMP 421 WEST MAIN STREET FRANKFORT, KY 40601				
parent company's information here (optional): FEIN: Name <u>: (optional)</u>				
	nd title of all current officers. All organizations must list at l address. Corporations are required to list a Secretary or o			ot
President MATTHEW C.	OSBORNE	ة. 		·
Treasurer PATRICK SHE				
Vice President JOSHUA HAM	MOND			
Secretary PAUL PONTE				
principal office address.	ast three (3) directors: All directors of the non-profit must b	e listed. If Not spe	cified, director addresses default to <u>the</u>	
JOSHUA HAMMOND	PATRICK SHEA	: ٹیر .		·
TIMOTHY BALLARD	MATTHEW C. OSBORNE	e te et		
PAUL PONTE			and the	
MARK SEGEL		The second second second		
ROBERT BALDACCI			2	
2021. The undersigned states that the grou satisfies the requirements of KRS 273.318	lved on October 18, 2021 because the entity on october 18, 2021 because the entity on the solution either did not exist or have a solution of \$130.00 because the kentucky Department of \$130.00 beca	been eliminate 0, payable to	ed, and the entity's name 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 FARMDALE ADULT CITIZENS TOWER II, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271 B.14-220.

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

X BM K	Vice President	7/13/2022
Signature of officer Or chairman of the board (Required)	Title (Required)	Date (Required)



FARMDALE ADULT CITIZENS TOWER II, INC. 6501 VANDRE AVENUE LOUISVILLE KY 40228

 Notice Date:
 July 14, 2022

 KY SoS Org. ID:
 0507468

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. You are registered with the Department of Revenue. An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing. 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	 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. 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. 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: Megan REVY099, Taxpayer Services Specialist II Email: MeganD.Roberts@ky.gov Direct: 502-564-7310