Organization ID # 1059468 State of origin KY Filing fee \$130.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

1059468.06

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Michael G. Adams Kentucky Secretary of State

Received and Filed: 3/22/2023 11:10 AM Fee Receipt: \$130.00

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 years 2022 through 2023

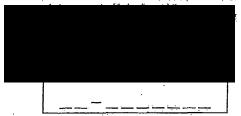
Exact limited liability	company	name and	principal	office address

JET DENTAL OF KENTUCKY, LLC 1881 W TRAVERSE PKWY STE E

#102 LEHI UT 84043

Registered Agent and Registered Office Address

Cogency Global Inc. 828 Lane Allen Rd Ste 219 Lexington, KY 40504 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



If the above companion company's information		ompany's Kentucky	tax return as a disre	garded entity or a subsidiary	, please provide the	parent
FEIN:	Name:					
, = 100 - 2 	- Ivanis			<u></u>		
Managers - List the	name And address of the limi	ted liability company's	nanagers, If not specifie	d, addresses default to the LLC's	onncipal office address.	
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The above entity was administratively dissolved on October 4, 2022 because the entity did not file its annual report for the year 2022. 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 \$130.00, 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 Jet Dental of Kentucky, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

II HOU	an officer of said entity, please provide a	Declaration of Power of Attorney with the Reinstatement Applic	ation.	
X	Jonn (CEO	2/14/23	
	Signature of member or manager (Required)	Tille (Required)	Date (Required)	

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

Jet Dental of Kentucky, LLC 828 Lane Allen Rd Ste 219 Lexington KY, 40504

Notice Date: March 22, 2023

KY SoS Org. ID: 1059468

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.
- 2. An authorized person requested this letter.
- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 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 date above.
 - 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: Megan REVY099, Taxpayer Services Specialist II

Email: MeganD.Roberts@ky.gov

Direct: 502-564-7310