Organization ID # 0552469	Commonwoolth of Kontu		0552469.09 mstratte
State of origin KY		Commonwealth of Kentucky	
Filing fee \$145.00 AliSO	n Lundergan Grimes, Secretary of S		/ lie en Lunder gan en lie e
			Kentucky Secretary of State
			Received and Filed: 3/14/2016 11:08 AM
Alison Lundergan Grimes	Reinstatement Applicat	ion and	Fee Receipt: \$145.00
Secretary of State P. O. Box 718			
Frankfort, KY 40602-0718	Reinstatement Annual	Report	
(502) 564-3490	For the years 2014 through	2016	
http://www.sos.ky.gov			
	poration name and principal office address		ffice address and registered agent dress cannot be changed on this
J.S. OSBORNE, O.D., P.		form. When rein	stating, you cannot modify the
Discrete the second sec		he reinstatement is filed. Once the filed, the statement of change can be	
PIKEVILLE KY 41501 filed online at app downloaded from		p.sos.ky.gov/ftsearch or can be n our website.	
	_		
Registered Agent and Registere	ed Office Address		
J. S. OSBORNE			
3469 NORTH MAYO TRA PIKEVILLE, KY 41501	AIL CONTRACTOR OF A		
FIREVILLE, RT 41501			
Principal Officers - List the name, add	dress and title of all current officers. All organizations must list at lea	st one (1) officer, ev	en in the case of a sole officer. If not
	al office address. Corporations are required to list a Secretary or oth	er onicer serving as	
Sole Officer J S OSE			· · · · · · · · · · · · · · · · · · ·
	<u> </u>		
<u> </u>			- <u> </u>
Directors - List the name and address of director addresses default to the principal office	all directors (if applicable).No listing of directors is verification that the address.	e corporation has dis	pensed with directors. If not specified,
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			······································
			<u> </u>
···		·	
Shareholders - List the name and addre	ess of the corporation's shareholders. If not specified, shareholder ac	idresses default to th	e principal office address.
J S OSBORNE			
		1877	
2014. The undersigned states that t	ly dissolved on September 30, 2014 because the e he grounds for dissolution either did not exist or hav 71B.14-210. Enclosed is a check in the amount of \$	/e been elimina	ted, and the entity's name
	signed hereby authorizes the Kentucky Department RNE, O.D., P.S.C. to the Secretary of State, as req		
11.1	provide a Declaration of Power of Attorney with the	e Reinstatemer	t Application.
X//Xend Klim	em President		3-10-16
Signature of officer or chairman of the bo	pard (Required)		J-/0-/6 Date (Required)
		ation	
I president of said corporation cart	Certificate of Professional Service Corpor ify that all the shareholders, not less than half of the		all officers other than secretary
and treasurer of the professional se	rvice corporation are duly qualified as provided in K ting board that licenses the shareholders described is modal report, and I declare under penalty of perjury under the laws	RS Chapter 27	4 and a copy of such annual
X / Nemel A	lem 2	in the second	

Senature of president of the professional service corporation (Required) 4



COMMONWEALTH OF KENTUCKY DIVISION OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION 275 E MAIN ST, 2-EH FRANKFORT, KY 40621-0001 (502) 564-2272 <u>https://kewes.ky.gov</u> DES.UIT@KY.GOV

Date: 03/14/2016

J.S. OSBORNE, O.D., P.S.C.

Dear Sir/Madam:

KRS 14A.7-030(1)(f) CERTIFICATE

The Division 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 Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0552469





DANIEL P. BORK Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

An Equal Opportunity Employer M/F/D

March 14, 2016

J.S. OSBORNE, O.D., P.S.C. 124 VILLAGE ST PIKEVILLE, KY 41501

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **J.S. OSBORNE, O.D., P.S.C.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2014, and has paid the taxes shown to be due or assessed as of the date of this letter. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the professional service corporation. This letter is valid for 30 days from the date of this letter.

Sincerely,

Theresa REV0868, Taxpayer Services Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7288 FAX# 502-564-0058

Kentucky Secretary of State organization number 0552469

