Organization ID # 0787569 State of origin

Commonwealth of Kentucky Filing fee \$145.00 Alison Lundergan Grimes, Secretary of S

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Alison Lundergan Grimes

Kentucky Secretary of State Received and Filed: 9/8/2014 10:56 AM Fee Receipt: \$145.00

Alison Lundergan Grimes 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 2012 through 2014

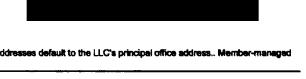
Exact limited liability company name and principal office address

LISA C. EDGE MD, PLLC **161 N. EAGLE CREEK SUITE 150 LEXINGTON KY 40509**

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.zos.ky.poviitsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

CHAD R. WADLINGTON 200 WEST VINE STREET **SUITE 620 LEXINGTON, KY 40507**



embers - List the name and address of the limited liability company's members. If not specified, addresses default to the LLC's principal office address Member-managed
the above entity was administratively dissolved on September 11, 2012 because the entity did not file its annual report for the year 012. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name at a time at the sequirements of KRS 275.295. Enclosed is a check in the amount of \$145.00, payable to Kentucky State Treasurer.
nder penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax formation pertaining to LISA C. EDGE MD, PLLC to the Secretary of State, as required for reinstatement pursuant to KRS

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

07/24/2014 **MEMBER** Date (Required) Title (Required)

LISA C. EDGE, MD

271B.14-220.



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

September 8, 2014

LISA C. EDGE MD, PLLC 161 N. EAGLE CREEK SUITE 150 LEXINGTON KY 40509

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **LISA C. EDGE MD, PLLC** has filed Kentucky Income Tax Returns through the tax year ended 2013, 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 limited liability company. This letter is valid for 30 days from the date of this letter.

Sincerely,

James REVE277, Taxpayer Services Specialist II Pass Through Entity Branch 501 High Street, Mail Station 69 Frankfort, KY 40601

Phone: (502) 564-7359 Fax: (502) 564-3392

Kentucky Secretary of State organization number 0787569

