Organization ID # 0317172 State of origin

Alison Lundergan Grimes

Secretary of State

P. O. Box 718

Frankfort, KY 40602-0718

(502) 564-3490 http://www.sos.kv.gov

Commonwealth of Kentucky Filing fee \$115.00 Alison Lundergan Grimes, Secretary of S

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mstratton **PRPF**

Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 12/9/2016 12:38 PM Fee Receipt: \$115.00

Reinstatement Application and **Reinstatement Annual Report** For the year 2016

RST

Exact professional service corporation name and principal office address

R.P. GRANACHER, JR., M.D., P.S.C 1401 HARRODSBURG RD. **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 of change can be filed online at app.sos.ky.gov/ftsearch or can be downloaded from our website

Registered Agent and Registered Office Address

ROBERT P. GRANANCHER, JR. 1401 HARRODSBURG RD.

LEXINGTON, KY 40504 If the above company is included in a parent company's Kentucky tax return as a disregarded entity or a subsidiary, please provide the parent company's information here (optional): FEIN: Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian ROBERT P GRANANCHER JR Sole Officer Directors - List the name and address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors. If not specified, director addresses default to the principal office address. Shareholders - List the name and address of the corporation's shareholders. If not specified, shareholder addresses default to the principal office address. ROBERT P GRANANCHER JR The above entity was administratively dissolved on October 1, 2016 because the entity did not file its annual report for the year 2016. 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 271B.14-210. Enclosed is a check in the amount of \$115.00, 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 R.P. GRANACHER, JR., M.D., P.S.C to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220. If not an office pof said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

Signature of officer or chairman of the board (Required

Certificate of Professional Service Corporation

I, president of said corporation, certify that all the shareholders, not less than half of the directors, and all officers other than secretary and treasurer of the professional service corporation are duly qualified as provided in KRS Chapter 274 and a copy of such annual report has been filed with the regulating board that licenses the shareholders described in this certificate.

I hereby certify that wam authorized to subijit this angual report, and I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct as of today.

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Signature of president of the professional service corporation (Required



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

December 9, 2016

R.P. GRANACHER, JR., M.D., P.S.C 1401 HARRODSBURG RD. SUITE A420 LEXINGTON KY 40504

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **R.P. GRANACHER, JR., M.D., P.S.C** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2015, 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,

Brad REVX069, Taxpayer Services Specialist II Division of Corporation Tax State Office Building, 501 High Street, Mail Station 52 Frankfort, KY 40601 502-564-8139 ext.42055 FAX# 502-564-0058

Kentucky Secretary of State organization number 0317172





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 https://kewes.ky.gov DES.UIT@KY.GOV

Date: 12/09/2016

R.P. GRANACHER, JR., M.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 0317172

