ganization ID # 1102272 Ite of origin KY ng fee \$130 Mic	Commonwealth of Kentucky hael G. Adams, Secretary of S	Received and	y of State Filed
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	3/14/2024 4:05:07 F Fee receipt: \$130.00 Reinstatement Application and Reinstatement Annual Report For the years 2023 through 2024		
Exact limited liability company SKILLZ 4 LIFE THERA 204 EAST JACOB ST LOUISVILLE KY 40203	a PY, LLC	gent name/office a on this form. When nodify the addresse	e address and registere iddress cannot be chai reinstating, you cannot is until the reinstatement tatement is filed, the will be filed.

Managers - List the name And address of the limited liability company's managers. If not specified, addresses default to the LLC's principal office addr MARLEETA HARRIS SKILLZ4LIFE 204 EAST JACOB STREET

County: Business size: Business type: Jefferson Small Health Services

The above entity was administratively dissolved on 10/4/2023 because the entity did not file its annual report for the year 2023. 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 14A.3-010; and that the entity has taken no steps to wind up and liquidate its business and affairs.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to Skillz 4 Life Therapy, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: MARLEETA Harris Title: Owner 3/14/2024



Skillz 4 Life Therapy, LLC 204 EAST JACOB ST Louisville KY, 40203

Notice Date:	March 14, 2024
KY SoS Org. ID:	1102272

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 III Email: MeganD.Roberts@ky.gov Direct: 502-564-7310	