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Organization ID #	1023577 Com	-			1023577.09	balimonos PRPF
Organization ID # State of origin	KY Com	monweal	th of Kentu	ску	Alison Lundergan Grime	es
State of origin	ໜິAlison Lunde	rgan Gri	mes Secret	ary of St	Kentucky Secretary of S	
rinng iee a i io.u		i gun On				
	· · · · ·				12/6/2019 9:20 AM Fee Receipt: \$115.00	
Alison Lunderga	an Grimes					
Secretary of	f State Rei	nstateme	nt Applicati	on and		
P. O. Box	718 Poi		ent Annual I		RST	
Frankfort, KY 40	JOOL ONIO			report	•	
(502) 564-		Fort	he year 2019			•
http://www.so	s.ky.gov					
	· · · · · · · · · · · · · · · · · · ·			<u> </u>		
	name and principal office a	<u>ddress</u>			ice address and registered agent ress cannot be changed on this	t
	ORTH KY INC			form. When reins	stating, you cannot modify the	
	DDLAWN ROAD				e reinstatement is filed. Once the iled, the statement of change can b	e
			filed online at app	online at <u>app.sos.ky.gov/ftsearch</u> or can be nloaded from our website.		
			and the state of the second	downloaded from	our website.	
	nd Registered Office Addres	<u>SS</u> and the second s	and a state of the Baston			
			일 곳 :			
8075 Steiler Florence, K						
	s included in a parent company's	s Kentucky tax retu	urn as a disregarde			
company's information		and see	d . ₁₈₇₈			
FEIN:	Name:	2		- 424		
Principal Officers	- List the name, address and title of a	all current officers. All c	prognizations must list at least	st one (1) officer. eve	n in the case of a sole officer. If not	t
specified, officer addresses	default to the principal office address. C	Corporations are requi	red to list a Secretary or othe	r officer serving as re	ecords custodian	
President	VIMALKUMAR I PATEL		8075 STEILEN DR, FI			
Vice-President	PINA DAVE		11127 FOUNTAINGR	OVE DR, CHARL	OTTE, NC 28262	
Secretary	SALIL PATEL		319 BENDIX DR, SAL			
Treasurer	<u>SALIL PATEL</u>		319 BENDIX DR, SAL	ISBURY, NC 281	46	
	me And address of all directors (if app the principal office address.	licable).No listing of di	rectors is verification that the	e corporation has dis	pensed with directors. If Not specifi	ed,
		Constanting and the second		Star Carlos Carlos		
		180338				
			· · · · · · · · · · · · · · · · · · ·	1.2		
· · · ·	1 Service L		No Company			
		A. Sala	A Casal State	ê 6. 4		
:		a geografia Antonio	and the second	e e e e e e e e e e e e e e e e e e e		
The above entity was	administratively dissolved or	n October 16-20	19 because the entity	did not file its a	annual report for the year 2	2019.
The undersigned star	tes that the grounds for disso	lution either did	not exist or have beer	n eliminated, an	d the entity's name satisfie	es the
requirements of KRS	271B.14-210. Enclosed is a	check in the am	ount of \$115.00, paya	ble to Kentucky	/ State Treasurer.	
Under penalty of peri	jury, the below signed hereby	authorizes the k	Kentucky Department	of Revenue to r	release any applicable tax	
information pertainin	g to SUNRISE NORTH KY Ir	nc to the Secreta	ry of State, as require	d for reinstatem	nent pursuant to KRS	
271B.14-220.	T No. 1 N	ిళ్లికి కాండ్ మండలు		599 N. 1992 NOV		
	- 17 Se De	14 - Maria (2) (2) (2) (2) (2) (2) (2) (2) (2) (2)	이었다는 여기가 깨끗 한 것이다.	B. C. L.	A	

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

<u>×</u>	ignature of officer Or chairman of the board (R	PRESIDENT	<u>11/29/2019</u> Date (Required)
v	1 male		



SUNRISE NORTH KY Inc 122 w woodlawn road D 101 Charlotte NC 28217 Notice Date: December 5, 2019 KY SoS Org. ID: 1023577

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	TION 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: Nicole REVX129, Taxpayer Services Specialist II Email: Nicole.McTiernan@ky.gov Direct: 502-564-2062				



COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 <u>https://kewes.ky.gov</u> UITax@KY.GOV

Date: 12/05/2019

SUNRISE NORTH KY Inc

Dear Sir/Madam:

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

The Office 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 Office of Unemployment Insurance PO Box 948 Frankfort, Kentucky 40602-0948 Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 1023577

