Organization ID # 0714579 State of origin Filing fee \$160.00

Michael G. Adams

Secretary of State P. O. Box 718

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

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0714579.06

kdcoleman

Michael G. Adams

Kentucky Secretary of State Received and Filed: 8/14/2020 12:31 PM Fee Receipt: \$160.00

Reinstatement Application and **Reinstatement Annual Report** Frankfort, KY 40602-0718 For the years 2017 through 2020

731

Date (Required)

Exact limited liability company name and principal office address

GATEWAY RECOVERY HOME, LLC 6952 WOODBURY LOOP **MORGANTOWN KY 42261**

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

	downloaded from our website.
Registered Agent and Registered Office Address GARY L. WALLACE 6952 WOODBURY LOOP	FEIN (Optional)
MORGANTOWN, KY 42261 If the above company is included in a parent company's Kentucky tax return as a disregard information here (optional): FEIN: Name:	ded en
Members - List the name And address of the limited liability company's members. If not specified, a LLCs are not required to list their members.	addresses default to the LLC's principal office address Member-managed
GARY LYNN WALLACE	
CATHY WALLACE	
The above entity was administratively dissolved on October 9, 2017 because to The undersigned states that the grounds for dissolution either did not exist or the requirements of KRS 275.295. Enclosed is a check in the amount of \$160.	have been eliminated, and the entity's name satisfies
Under penalty of perjury, the below signed hereby authorizes the Kentucky Deinformation pertaining to GATEWAY RECOVERY HOME, LLC to the Secretar KRS 271B.14-220.	partment of Revenue to release any applicable tax y of State, as required for reinstatement pursuant to
If not an officer of said entity, please provide a Declaration of Power of Attorne	ey with the Reinstatement Application.
X Horn I Wolfred Brendert	<u> 6-26-2020</u>

Title (Required)

www.revenue.ky.gov Website: Phone: 502-564-8139 Fax: 502-564-0058

GATEWAY RECOVERY HOME, LLC 385 Elmo Road Glasgow KY 42141

Notice Date: August 14, 2020 KY SoS Org. ID: 0714579

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.

1. You are registered with the Department of Revenue.

An authorized person requested this letter.

3. You filed income and LLE tax returns as required, or you are exempt from

4. 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 1. 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
 - 2. 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.
 - 3. 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: Dottye REV3769, Taxpayer Specialist I

Email: Dottye.Roberts@ky.gov

Direct: 502-564-0102