Organization ID # 0897779 State of origin

Commonwealth of Kentucky

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

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Alison Lundergan Grimes

Kentucky Secretary of State Received and Filed: 12/18/2017 2:48 PM Fee Receipt: \$115.00

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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 year 2017

Exact professional service corporation name and principal office address CARROLL MEDICAL ENTERPRISES, PSC **721 COURT STREET** PAINTSVILLE KY 41240

The principal office address and registered agent name/office address cannot be changed on this form. Where 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

CHAD E. CARROLL 721 COURT STREET PAINTSVILLE, KY 41240

If the above company is included in a parent company's Kentucky tax return as a disregard company's information here (optional):

FEIN: Name:

FEIN	(Optio	nal)		_
				nt

President	CHAD E CARROLL
	ame and address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors. If not specific to the principal office address.
Shareholders -	the name and address of the corporation's shareholders. If not specified, shareholder addresses default to the principal office address.
CHAD E CARRO	
<u>91710 = 97 / 1113</u>	

The above entity was administratively dissolved on October 9, 2017 because the entity did not file its annual report for the year 2017. 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 CARROLL MEDICAL ENTERPRISES, PSC to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

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

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 I am authorized to submit this annual report, and I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct as of today.

nature of president of the professional service corporation (Required)

Organization ID # 0897779
State of origin KY
Filing fee \$115.00



Please indicate the county in which your business op County: Johnson	erates:
	lease shade the box completely.
Please indicate the size of your business:	
Small (Fewer than 50 employees)	
Large (50 or more employees)	
Please indicate whether any of the following make up	more than fifty percent (50%) of your business's ownership.
rease majore whether any or the renowing mane up	more than mey personne (correspond to your discount of the correspond to the corresponding to
Women-Owned	
Veteran-Owned	
Veteran-Owned	your business:
Veteran-Owned Minority-Owned	your business: Wholesale Trade
Veteran-Owned Minority-Owned Please indicate which of the following best describes	
Veteran-Owned Minority-Owned Please indicate which of the following best describes Agriculture	Wholesale Trade
Veteran-Owned Minority-Owned Please indicate which of the following best describes Agriculture Mining	Wholesale Trade Retail Trade



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

December 18, 2017

CARROLL MEDICAL ENTERPRISES, PSC 317 4TH ST. PAINTSVILLE KY 41240

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **CARROLL MEDICAL ENTERPRISES**, **PSC** has filed Kentucky Income Tax Returns through the tax year ended 2016, 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,

John REV3858, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 Phone# (502) 564-2099 FAX# (502) 564-0058

Kentucky Secretary of State organization number 0897779





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: 12/18/2017

CARROLL MEDICAL ENTERPRISES, PSC

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,

Chad Atha Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621

Phone: (502) 564-2272

Kentucky Secretary of State organization number 0897779

