Organization ID # 0949880 Commonwealth of Kentucky State of origin KY Michael G. Adams, Secretary of State Filing fee \$130.00			Received and Filed:	
Michael G. Adar Secretary of Sta P. O. Box 718 Frankfort, KY 40602 (502) 564-3490 http://www.sos.ky	te <b>Re</b> -0718 <b>R</b> e	Reinstatement Application and       7/13/2022 6:13 AM         Reinstatement Application and       Fee Receipt: \$130.00         Reinstatement Annual Report       RST         For the years 2021 through 2022       RST		
Exact organization name ISVA GROUP, INC 413 TREMONT L WINCHESTER K	C. ANE	address	agent name/of on this form. modify the add filed. Once the statement of cl	office address and registered ffice address cannot be changed When reinstating, you cannot iresses until the reinstatement is reinstatement is filed, the hange can be filed online at <u>https:</u> <u>ov\ftsearch</u> or can be downloaded
company's information here FEIN: Nam Principal Officers - List	PEZ ANE KY 40391 Ided in a parent company (optional): a:	y's Kentucky tax return as a disregard le of all current officers. All organizations m fice address. Corporations are required to fis	ust list at least one (1) of	ficer, even in the case of a sole officer.
President	SILVIANO LOPEZ	ne address, corporations are required to its	at a Secretary of other off	
Secretary	FRANCISCO LOPE	-Z		a,
Treasurer	EFRIN LOPEZ	in a saintiin a sharraan in an ar	***************************************	
Vice President	SERGIO LOPEZ			
Directors - List the name A specified, director addresses def		if applicable).No listing of directors is verifi diress.	cation that the corporation	) has dispensed with directors. If Not
2021. The undersigned s	tates that the grounds	d on October 18, 2021 because the s for dissolution either did not exis 0. Enclosed is a check in the amo	t or have been elimi	inated, and the entity's name
Under penalty of perjury,	the below signed here	eby authorizes the Kentucky Depar the Secretary of State, as required	tment of Revenue to	o release any applicable tax
If not an officer of said en	ny, please provide a [	Declaration of Power of Attorney wi	ith the Reinstateme	nt Application.

Signature of officer Of chairman of the board (Required) I¶ K

President Title (Required)

6-16.22 Date (Required)



ARGI

CPA'S & ADVISERS, PLLC 713 MCDOWELL BLVD BARDSTOWN, KY 40004 
 Notice Date:
 July 11, 2022

 KY SoS Org. ID:
 0949880

RE:	Letter of Good Standing Request - Approved		
SUMMARY	You requested a letter of good standing, and your entity is in <b>good standing</b> with the Department of Revenue.		
OUR DETERMINATION	We verified the following information.		
	<ol> <li>You are registered with the Department of Revenue.</li> <li>An authorized person requested this letter.</li> <li>You filed income and LLE tax returns as required, or you are exempt from filing.</li> <li>You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.</li> <li>This notice will remain current for 30 days from the notice date above.</li> </ol>		
WHAT YOU NEED TO DO	<ol> <li>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.</li> <li>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.</li> <li>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.</li> </ol>		
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Bruce REV3968, Taxpayer Services Specialist II Direct: 502-564-2038		



## 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: 07/11/2022

ISVA GROUP, 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 0949880

