Organization ID # State of origin Filing fee	0565884 KY \$115.00						0565884.09 Elaine N. Walker, Secretar Received and Filed: 10/6/2011 3:14 PM Fee Receipt: \$115.00	
Elaine N. W Secretary o P. O. Box Frankfort, KY 4((502) 564- http://www.so	f State 718 0602-0718 3490	Reinstatement Applica Reinstatement Annual For the year 2011				L	RST	
BTH MEDI	CAL, INC. I FRIENDSH	orincipal office address			The principal offic name/office addre form. When reinsta addresses until the reinstatement is file filed online at <u>app.t</u> downloaded from o	ss cannot be ch ating, you cannot reinstatement is ed, the statement tos.ky.gov/ftsea	anged on this modify the filed. Once the of change can be	
Registered Agent : BRIAN HAV 5978 OLD PADUCAH Principal Officers	WKINS HWY 45 S. KY 42003 - List the name, ad	dress and title of all current officers. A	Il organization	s must list at	least one (1) officer, even	in the case of a s	sole officer. If not	
specified, officer addresses President		pal office address. Corporations are req	uired to list a	Secretary or i	other officer serving as rec Friendship Rd,	Padrical, K	1 42003	
······		······	- <u></u>					_
Directors - List the name	ne and address of	all directors (if applicable).No listing of address	directors is ve	rification that	the corporation has dispe	nsed with directo	rs. If not specified,	
					· · · · · · · · · · · · · · · · · · ·			
2011. The undersign satisfies the requirem Under penalty of perj	ed states that t lents of KRS 2 ury, the below	ly dissolved on September 10 he grounds for dissolution eit 71B.14-210. Enclosed is a ch signed hereby authorizes the CAL, INC. to the Secretary of	her did not eck in the Kentucky	exist or h amount o Departme	ave been eliminated f \$115.00, payable f ent of Revenue to re	d, and the en to Kentucky S lease any ap	ntity's name State Treasure Indicable tax	
	d entity, please	e provide a Declaration of Pov					-/ JU/ are (Required)	<u>' </u>



THOMAS B. MILLER Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

BOB BROOKS Executive Director

October 6, 2011

BTH MEDICAL, INC. 885 SOUTH FRIENDSHIP RD PADUCAH KY 42003

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **BTH MEDICAL**, **INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2010, 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 corporation. This letter is valid for 30 days from the date of this letter.

Sincerely,

Frankie Eden, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-7394 FAX# 502-564-3392

Kentucky Secretary of State organization number 0565884





EDUCATION and WORKFORCE DEVELOPMENT CABINET OFFICE OF EMPLOYMENT AND TRAINING

Steven L. Beshear Governor Tax Enforcement Branch 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone (502) 564-2272 Fax (502) 564-5442 <u>www.oet.ky.gov</u> Joseph U. Meyer Secretary

William Monterosso Executive Director

Date: 10/06/2011

BTH MEDICAL, INC.

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,

Courtney Hackworth Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0565884

