Organization ID # 1143884 State of origin KY **Commonwealth of Kentucky** 1143884 Filing fee \$115 Michael G. Adams Michael G. Adams, Secretary of St Ky Secretary of State Received and Filed 10/27/2023 1:45:14 PM Michael G. Adams Fee receipt: \$115.00 **Reinstatement Application** and Secretary of State RST P. O. Box 718 **Reinstatement Annual Report** Frankfort, KY 40602-0718 For the year 2023 (502) 564-3490 http://www.sos.ky.gov Exact organization name and principal office address The principal office address and registered

WARRIORS OUTDOOR RECREATION THERAPY, INC. 815 DIX DAM RD.

HARRODSBURG KY 40330

Registered Agent and Registered Office Address

FBT LLC 400 W. MARKET STREET SUITE 3200 LOUISVILLE, KY 40202 The principal office address and registerec agent name/office address cannot be chan; on this form. When reinstating, you cannot modify the addresses until the reinstatement i filed. Once the reinstatement is filed, the statement of change will be filed.

Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records

Officer	JEFFREY FRALEY	1176 BAKERS LN, NICHOLASVILLE, KY, 40356
Officer	BYRON CHAPMAN	13200 URTON LN. LOUISVILLE, KY, 40243
President	BYRON W MARLOWE	207 DONCASTER ROAD, VERSAILLES, KY, 40

Directors - Non-profit corporations must have at least three (3) directors. All directors of the non-profit must be listed. If Not specified, director addresses the principal office address.

BYRON WESLEY MARLOWE	207 DONCASTER ROAD, VERSAILLES, KY, 40383
JEFFREY FRALEY	1176 BAKERS LN, NICHOLASVILLE, KY, 40356
BYRON CHAPMAN	13200 URTON LN. LOUISVILLE, KY, 40243

The above entity was administratively dissolved on 10/4/2023 because the entity did not file its annual report for the year 2023. 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 14A.3-010; and that the entity has taken no steps to wind up and liquidate its business and affairs.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to WARRIORS OUTDOOR RECREATION THERAPY, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Byron Marlowe Title: President 10/27/2023



WARRIORS OUTDOOR RECREATION THERAPY, INC. 815 DIX DAM RD. HARRODSBURG KY, 40330			Notice Date: KY SoS Org. ID:	October 27, 2023 1143884
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	1. 2. 3. 4.	An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing.		
WHAT YOU NEED TO DO	1. 2. 3.	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.		
CONTACT INFORMATION	yo A Ei	you have any questions regarding this a. gent: Megan REVY099, Taxpayer Se nail: MeganD.Roberts@ky.gov irect: 502-564-7310		



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