Organization ID # 0607687 State of origin

Commonwealth of Kentucky Filing fee \$115.00 Alison Lundergan Grimes, Secretary of St

0607687.06

NOI

Alison Lundergan Grimes

**Kentucky Secretary of State** Received and Filed: 12/18/2018 9:38 AM Fee Receipt: \$115.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.kv.gov

# Reinstatement Application and **Reinstatement Annual Report** For the year 2018

xact limited liability company name	and principal office address		ce address and registered agent
HEALTH CONCEPTS, LLC		frame/ornce additional form. When reins	ess cannot be changed on this ating, you cannot modify the
206 COLBY HILLS DRIVE	>> 3246 Brighton	addresses until the	reinstatement is filed. Once the
-WINCHESTER KY 40391	> 3296 Brighton TLEXINGTON KY CAAddress 4059	reinstatement is fi filed online at <u>app</u> downloaded from	ed, the statement of change can be sos.ky.gov/ftsearch or can be our website.
egistered Agent and Registered Offi	ce Address 405	FEIN (Optio	nai)
GINA M. LANG	7		
206 COLBY HILLS DRIVE	/		
WINCHESTER, KY 40391			
the above company is included in a parent	company's Kentucky tax return as a disrega	ardec	t
ompany's information here (optional):			
EIN: Name:			

	*2 /U(a	NOTA NTON	piaco	Drive.	LEXINA.	KY 4000
GINA LANG LARRY ERTEL	3296	or ignition	11.00	11	F-21131.	1-1 1030
	<u></u>					<del></del>

The above entity was administratively dissolved on October 16, 2018 because the entity did not file its annual report for the year 2018. 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 275.295. 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 HEALTH CONCEPTS, LLC 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.

Website: www.revenue.kv.gov Phone: 502-564-8139

502-564-0058 Fax:

# HEALTH CONCEPTS, LLC 3296 BRIGHTON PLACE DR **LEXINGTON KY 40509**

Notice Date:

December 17, 2018

KY SoS Org. ID: 0607687

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.
- 2. An authorized person requested this letter.
- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 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 date above.
  - 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: Cory REV4079, Revenue Auditor I

Email: Cory.Johnson@ky.gov Direct: (502) 564-7370

Website: www.revenue.kv.gov Phone: 502-564-8139

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