



**EDUCATION and WORKFORCE DEVELOPMENT CABINET  
OFFICE OF EMPLOYMENT AND TRAINING**

**Steven L. Beshear**  
Governor

Tax Enforcement Branch  
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**Joseph U. Meyer**  
Secretary

**William Monterosso**  
Executive Director

Date: 11/09/2010

TRI STATE SPORTS MEDICINE AND REHABILITATION INC.

Dear Sir/Madam:

**KRS 271B.14-220(1)(e) CERTIFICATE**

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 271B.14-220(1)(e).

Sincerely,

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

Kentucky Secretary of State organization number 0614589