Organization ID # 1001489 State of origin KY Filing fee \$130

Commonwealth of Kentucky Michael G. Adams, Secretary of St

LRPF

1001489 Michael G. Adams KY Secretary of State Received and Filed

3/22/2024 9:36:59 AM Fee receipt: \$130.00

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Reinstatement Application and Report

For the years 2023 through 2024

RST

Exact limited liability company name and principal office address
COMBS & WILSON DENTISTRY, PLLC
527 WELLINGTON WAY SUITE 120
LEXINGTON KY 40503

The principal office address and registered agent name/office address cannot be chang 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.

Registered Agent and Registered Office Address

MAXIE COMBS, D.M.D. 527 WELLINGTON WAY SUITE 120 LEXINGTON, KY 40503

Members - List the name And address of the limited liability company's members. If not specified, addresses default to the LLC's principal office addre Member-managed LLCs are not required to list their members.

MAXIE COMBS, PSC 527 WELLINGTON WAY, LEXINGTON KY 40503

CAROL WILSON, DMD, PLLC 141 MINNOW COVE COURT, NICHOLASVLLE, KY 40356

County: Fayette Business size: Medium

Business type: Health Services

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 COMBS & WILSON DENTISTRY, PLLC to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: **Debbie Hudson** Title: **Accountant** 3/22/2024

Website: www.revenue.ky.gov Phone: 502-564-8139 Fax: 502-564-0058

COMBS & WILSON DENTISTRY, PLLC 527 WELLINGTON WAY SUITE 120 LEXINGTON KY, 40503

Notice Date: March 22, 2024

KY SoS Org. ID: 1001489

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: Megan REVY099, Taxpayer Services Specialist III

Email: MeganD.Roberts@ky.gov

Direct: 502-564-7310