ganization ID # 094 te of origin KY ng fee \$115			ealth of Kentucky ns, Secretary of S	Received an	<b>ry of State</b> Id Filed
Michael G. Ad Secretary of S P. O. Box 7 Frankfort, KY 406 (502) 564-34 http://www.sos.k	itate 18 02-0718 90	Reinstatement Application Reinstatement Annual Re For the year 2024		Fee recei n anu	ОСТ
Exact organization ( ADVANCED I 7013 S LAGO PANAMA CIT Registered Agent ar chad druin 1927 BEARC Louisville, KY	PLUMBING DON IY BEACH F nd Register AMP ROAE	AND SERVICES IN L 32408	C.	agent name/office on this form. Whe modify the address	ce address and registered address cannot be chan en reinstating, you cannot ses until the reinstatement i statement is filed, the ge will be filed.
Principal Officers	- List the name	fault to the principal office a	urrent officers. All organizations must list address. Corporations are required to list a <u>14515 PAULEYS C</u>	Secretary or othe	
County: Business size: Business type:	N	Jefferson Small	ecial Trade Contractors	B	

The above entity was administratively dissolved on 10/12/2024 because the entity did not file its annual report for the year 2024. 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 ADVANCED PLUMBING AND SERVICES Inc. to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Chad Druin Title: President / Owner 10/25/2024



## ADVANCED PLUMBING AND SERVICES Inc. 7013 S LAGOON PANAMA CITY BEACH FL, 32408

Notice Date: KY SoS Org. ID: 0943892

October 25, 2024

RE:	Letter of Good Standing Request - Approved	
SUMMARY	You requested a letter of good standing, and your entity is in <b>good standing</b> with the Department of Revenue.	
OUR DETERMINATION	<ol> <li>We verified the following information.</li> <li>You are registered with the Department of Revenue.</li> <li>An authorized person requested this letter.</li> <li>You filed income and LLE tax returns as required, or you are exempt from filing.</li> <li>You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.</li> <li>This notice will remain current for 30 days from the notice date above.</li> </ol>	
WHAT YOU NEED TO DO	<ol> <li>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.</li> <li>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.</li> <li>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.</li> </ol>	
AGENT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Louis REV4836, Taxpayer Services Specialist I Email: louis.szemethy@ky.gov Direct: 502-564-2057	



## COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 <u>https://kewes.ky.gov</u> UITax@KY.GOV

Date: 10/25/2024

ADVANCED PLUMBING AND SERVICES Inc.

Dear Sir/Madam:

## KRS 14A.7-030(1)(f) CERTIFICATE

The Office 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,

Samantha Tabor Office of Unemployment Insurance PO Box 948 Frankfort, Kentucky 40602-0948 Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0943892

