

Organization ID # 0402396

State of origin KY

Filing fee \$115.00

# Commonwealth of Kentucky

Elaine N. Walker, Secretary of State

0402396.06

bschell

LRPF

Elaine N. Walker, KY Secretary of State

Received and Filed:

11/30/2011 11:17 AM

Fee Receipt: \$115.00

Elaine N. Walker  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

## Reinstatement Application and Reinstatement Annual Report For the year 2011

RST

**Exact limited liability company name and principal office address**

CUMBERLAND VALLEY PHYSICIANS ORGANIZATION, LLC  
LONDON MEDICAL ARTS BUILDING  
202 WEST SEVENTH STREET  
LONDON KY 40741

The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at [app.sos.ky.gov/ftsearch](http://app.sos.ky.gov/ftsearch) or can be downloaded from our website.

**Registered Agent and Registered Office Address**

ROBERT L. BROWN III  
1005 SOUTH MAIN STREET, STE 101  
LONDON, KY 40741

**Managers** - List the name and address of the limited liability company's managers. If not specified, addresses default to the LLC's principal office address.

GLEN BAKER, M.D.

P. BRUCE BARTON, M.D.

ROBERT BUX, M.D.

JAMES HUFFMAN, M.D.

The above entity was administratively dissolved on September 10, 2011 because the entity did not file its annual report for the year 2011. 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 CUMBERLAND VALLEY PHYSICIANS ORGANIZATION, 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.

X

Signature of member or manager (Required)

Member

Title (Required)

11/28/2011

Date (Required)



**THOMAS B. MILLER**  
Commissioner

**FINANCE AND ADMINISTRATION CABINET  
DEPARTMENT OF REVENUE  
OFFICE OF INCOME TAXATION**

**ELYSE WEIGEL**  
Deputy Commissioner

**BOB BROOKS**  
Executive Director

November 30, 2011

**CUMBERLAND VALLEY PHYSICIANS ORGANIZATION, LLC  
C/O ROBERT L BROWN III  
1005 S. MAIN STE. 101  
CORBIN, KY. 40701**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **CUMBERLAND VALLEY PHYSICIANS ORGANIZATION, LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2010, and has paid the taxes shown to be due or assessed as of the date of this letter. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the limited liability company. This letter is valid for 30 days from the date of this letter.

Sincerely,

Christopher Southworth, Revenue Auditor  
Pass Through Entity Tax Branch  
501 High Street, Mail Sta. 69  
Frankfort, KY 40601  
502-564-7376  
FAX# 502-564-3392

Kentucky Secretary of State organization number 0402396