	ganization ID # 1069696					
te of origin KY ng fee \$115		Commonwealth of Kentucky ael G. Adams, Secretary of St		t KY Secretar	Michael G. Adams	
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov		Reinstatement Application Reinstatement Annual Re For the year 2024		Fee recei	11/14/2024 1:44:28 PM Fee receipt: \$115.00	
					RST	
Exact organization r TRI-CITY PAV PO BOX 406 LYNCH KY 40 Registered Agent an LISA CAUDILI 530 JOHNSO LYNCH, KY 4	WS, INC. 1855 1d Registered L N ROAD 0855	d Office Address	TH Orbit	gent name/office on this form. When nodify the address iled. Once the reins tatement of change	e address and registered address cannot be chang n reinstating, you cannot es until the reinstatement i tatement is filed, the e will be filed.	
	<ul> <li>List the name, a</li> </ul>	address and title of all c	urrent officers. All organizations must list			
		It to the principal office a	ddress. Corporations are required to list a PO BOX 406 LYNC	Secretary or other	officer serving as records	
officer. If not specified, office President	er addresses def au LISA CA corporations must l	Ilt to the principal office a UDILL have at least three (3) dir PO BC 330 EA	ddress. Corporations are required to list a	Secretary or other CH KY 40855 be listed. If Not sp 855	officer serving as records	

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 TRI-CITY PAWS, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Lisa Caudill Title: President 11/14/2024





TRI-CITY PAWS, INC.	
PO BOX 406	
LYNCH KY, 40855	

Notice Date:	November 14, 2024
KY SoS Org. ID:	1069696

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: Megan REVY099, Taxpayer Services Specialist III Email: MeganD.Roberts@ky.gov Direct: 502-564-7310	