Organization ID # 0439298 State of origin KY Filing fee \$115.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0439298.06

dwilliams **LRPF**

Michael G. Adams **Kentucky Secretary of State**

Received and Filed: 12/17/2021 9:38 AM Fee Receipt: \$115.00

RST

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 **Reinstatement Annual Report** For the year 2021

Exact limited liability company name and principal office address COMMUNITY MEDICAL ARTS BUILDING, LLC 325 WEST WALNUT STREET **LEBANON KY 40033**

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 https: \web.sos.ky.gov\ftsearch or can be downloaded

The principal office address and registered

| | • | , . | | | | |
|--|-----------------------|--------------------|--------------------|--------------------------|-----------------------|---------|
| Registered Agent and Registered Office | Address | | | | | |
| DAVID B GEORGE MD | | A . | • | | | |
| 325 WEST WALNUT STREET | | | | | | |
| LEBANON; KY 40033 | | • | | | | |
| If the above company is included in a parent co company's information here (optional): FEIN: Name: | mpany's Kentucky tax | return as a disr | egarded entity of | r a subsidiary, pleas | e provide the pare | nt |
| Members - List the name And address of the liminanaged LLCs are not required to list their members. | | nembers. If not sp | ecified, addresses | default to the LLC's pri | ncipal office address | Member- |
| RICHARD V STEEVES | | · | | | | |
| DAVID B GEORGE | | | * . | | | |
| BRIAN F SCOTT | | | | | | |
| GEORGE FAMILY LIMITED | ·. | | , | | | |
| The above entity was administratively diss 2021. The undersigned states that the gro satisfies the regulatements of KRS 275.29 | ounds for dissolution | n either did no | t exist or have ! | been eliminated, a | and the entity's n | ame |

perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to COMMUNITY MEDICAL ARTS BUILDING, LLC to the Secretary of State, as required for reinstatement pursuant to KRS

please provide a Declaration of Power of Afforney with the Reinstatement Application. If not an officer of said ent

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

Fax: 502-564-0058

COMMUNITY MEDICAL ARTS BUILDING, LLC 325 WEST WALNUT STREET **LEBANON KY 40033**

Notice Date:

December 16, 2021

KY SoS Org. ID: 0439298

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.
- 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: Bruce REV3968, Taxpayer Services Specialist II

Direct: 502-564-2038