Filing fee \$145.0	0166199 KY 00 Alison I	Commonwealth of Kentu Lundergan Grimes, Secre	tary of S Alison Lundergan Grimes
Alison Lundergar Secretary of 3 P. O. Box 7 Frankfort, KY 406 (502) 564-3 http://www.sos.	State 718 502-0718 490	Reinstatement Applicat Reinstatement Annual For the years 2014 through	Report
"LESLIE RIC 121 KENSIN	CHARDSON, O.		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 <u>app.sos.ky.gov/ftsearch</u> or can be downloaded from our website.
725 CAMPBI CAMPBELLS rincipal Officers - 1	HARDSON, O.D ELLSVILLE BY F SVILLE, KY 4271 List the name, address	PASS 18 and title of all current officers. All organizations must list at leas	st one (1) officer, even in the case of a sole officer. If not
	LESLIERIC	ce address. Corporations are required to list a Secretary or othe CHARDSON	gten Liky (ample 15/11/2 4) 427/
• •	and address of all dire	ectors (if applicable).No listing of directors is verification that the	corporation has dispensed with directors. If not specified,
ector addresses default to th	e principal office addres	121 Kensingten Way	Campbellsville, Ky 42718
rector addresses default to th	e principal office addres	121 Krnsingten lilaug	Campbellsville, Ky 42718
rector addresses default to th ESLIE RICHARDS	e principal office addres ON name and address of	the corporation's shareholders. If not specified, shareholder add	
hareholders - List the ESLIE RICHARDS hareholders - List the ESLIE RICHARDS he above entity was a he above entity was a he above entity was a he above entity was a he above entity of perjury	dministratively dis states that the gr y, the below signe	121 Kr nsingten Lucy	tity did not file its annual report for the year e been eliminated, and the entity's name 145.00, payable to Kentucky State Treasurer. of Revenue to release any applicable tax

s been filed with the regulating boad that licenses the shareholders described in this certificate. If that I am authorized to submit this annual eport, and I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct as of today. I hereby cer

Signature of the professional service corporation (Required) <u>X</u>



DANIEL P. BORK Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

An Equal Opportunity Employer M/F/D

July 5, 2016

"LESLIE RICHARDSON, O.D., P.S.C." 121 KENSINGTON WAY CAMPBELLSVILLE KY 42718

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **"LESLIE RICHARDSON, O.D., P.S.C."** has filed Kentucky Income Tax Returns through the tax year ended December 31,2015, 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 professional service corporation. This letter is valid for 30 days from the date of this letter.

Sincerely,

Gary REV1282, Revenue Program Officer Division of Corporation Tax 501 High Street, Mail Sta.52 Frankfort, KY 40601 502-564-7281 FAX# 502-564-0058

Kentucky Secretary of State organization number 0166199





COMMONWEALTH OF KENTUCKY DIVISION OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION 275 E MAIN ST, 2-EH FRANKFORT, KY 40621-0001 (502) 564-2272 <u>https://kewes.ky.gov</u> DES.UIT@KY.GOV

Date: 07/05/2016

"LESLIE RICHARDSON, O.D., P.S.C."

Dear Sir/Madam:

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

The Division 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,

Richard Lemay Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0166199

