

Organization ID # 0858699

State of origin KY

Filing fee \$115.00 Alison Lundergan Grimes, Secretary of State

Commonwealth of Kentucky

0858699.09

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PRPF

Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
12/5/2014 12:40 PM
Fee Receipt: \$115.00

Alison Lundergan Grimes
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 2014

RST

Exact professional service corporation name and principal office address

EMMONS ELITE DENTISTRY, PSC
105 WEST COURT STREET
GREENSBURG KY 42743

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/fsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

TESSA EMMONS
105 WEST COURT STREET
GREENSBURG, KY 42743

Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian

Officer	Name	Address
President	Tessa Hancock Emmons	105 West Court Street, Greensburg Ky 42743
Vice-President		
Secretary		
Treasurer		

Directors - List the name and address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors. If not specified, director addresses default to the principal office address.

Director	Name	Address
	Tessa Hancock Emmons	

Shareholders - List the name and address of the corporation's shareholders. If not specified, shareholder addresses default to the principal office address.

Shareholder	Name	Address
	Tessa Hancock Emmons	

The above entity was administratively dissolved on September 30, 2014 because the entity did not file its annual report for the year 2014. 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 271B.14-210. 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 EMMONS ELITE DENTISTRY, PSC 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 Tessa Hancock Emmons
Signature of officer or chairman of the board (Required)

President
Title (Required)

10/20/14
Date (Required)

Certificate of Professional Service Corporation

I, president of said corporation, certify that all the shareholders, not less than half of the directors, and all officers other than secretary and treasurer of the professional service corporation are duly qualified as provided in KRS Chapter 274 and a copy of such annual report has been filed with the regulating board that licenses the shareholders described in this certificate.

X Tessa Hancock Emmons
Signature of president of the professional service corporation (Required)



**EDUCATION and WORKFORCE DEVELOPMENT CABINET
OFFICE OF EMPLOYMENT AND TRAINING**

Steven L. Beshear
Governor

Tax Enforcement Branch
275 East Main Street, 2-EH
Frankfort, Kentucky 40621
Phone (502) 564-2272
Fax (502) 564-5442
www.oet.ky.gov

Thomas O. Zawacki
Secretary

Buddy Hoskinson
Executive Director

Date: 12/05/2014

EMMONS ELITE DENTISTRY, PSC

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,

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

Kentucky Secretary of State organization number 0858699



THOMAS B. MILLER
Commissioner

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

ELYSE WEIGEL
Deputy Commissioner

BOB BROOKS
Executive Director

December 5, 2014

**EMMONS ELITE DENTISTRY, PSC
105 WEST COURT STREET
GREENSBURG KY 42743**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **EMMONS ELITE DENTISTRY, PSC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2013, 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,

Kim REVE217, Taxpayer Services Specialist II
Pass Through Entity Tax Branch
501 High Street, Mail Sta. 69
Frankfort, KY 40601
502-564-7344
FAX# 502-564-3392

Kentucky Secretary of State organization number 0858699