Organization ID # 0790589 State of origin

Commonwealth of Kentucky Filing fee \$160.00 Alison Lundergan Grimes, Secretary of S

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sburgin **LRPF**

Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed:

11/20/2019 8:19 AM Fee Receipt: \$160.00

RST

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 years 2016 through 2019

Exact limited liability company name and principal office address MICHAEL C. PRATT, DMD, MS, PLLC

244 REDWING DRIVE **WINCHESTER KY 40391**

Registered Agent and Registered Office Address

MICHAEL C PRATT 244 REDWING DRIVE WINCHESTER, KY 40391

If the above company is included in a parent company's Kentucky tax return as a disrega company's information here (optional):

Managers - List the name and address of the limited liability company's managers. If not specified, a

__ Name:

MICHAEL CLARK PRATT

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 or can be downloaded from our website.

ard	ht
ddresses default to the LLC's principal office address.	

The above entity was administratively dissolved	on Ootobar 1, 2016 h	soccuse the entity did t	not file its appual rope	rt for the year 2016

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 \$160.00, 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 MICHAEL C. PRATT, DMD, MS, PLLC to the Secretary of State, as required for reinstatement pursuant to KRS 271B,14-220.

If not an officer of said outity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

10/16/17 OWNER Signature of member or manager (Required)

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

November 19, 2019

0790589

502-564-0058 Fax:

Notice Date:

KY SoS Org. ID:

MICHAEL C. PRATT, DMD, MS, PLLC 244 REDWING DRIVE **WINCHESTER KY 40391**

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.

3. 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.

RE:

- 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: Megan REVY099, Taxpayer Services Specialist I

Email: MeganD.Roberts@ky.gov

Direct: 502-564-7310