| Organization ID # 0682 | 7849 | | |
|---|--|--|---|
| State of origin KY | Commonwea | Ith of Kentucky | 0682849.09 Dcornish |
| Filing fee \$115.00 | Alison Lundergan Gr | imes Secretary | of Standard International NPRF |
| Filing lee \$115.00 | anson Eunacigan Ci | | Alison Lundergan Grimes |
| | | | Received and Filed: |
| | | | 11/1/2017 1:14 PM |
| Alison Lundergan Gri | mes Poinstatom | ent Application | and Fee Receipt: \$115.00 |
| Secretary of State | 1 | | |
| P. O. Box 718 Frankfort, KY 40602-(| Reinstatem | ent Annual Rep | ort Not |
| (502) 564-3490 | | the year 2017 | ļ |
| http://www.sos.ky.g | | ale year zon | ļ |
| http://www.coc.kj.g | | | |
| | | | principal office address and registered agent |
| Exact organization name | and principal office address | | e/office address cannot be changed on this |
| ABUNDAN I GRA | CE FELLOWSHIP OF THE ASSEMB | | , When reinstating, you cannot modify the esses until the reinstatement is filed. Once the |
| P. O. BOX 1455 | 151. | reinst | atement is filed, the statement of change can be |
| nied online at a | | online at <u>app.sos.ky.gov/ftsearch</u> or can be loaded from our website. | |
| | | | |
| Registered Agent and Reg | gistered Office Address | FEI | N (Optional) |
| KAREN S. WIX 655 CAMPBELL F | | | |
| MADISONVILLE. | | | |
| If the above company is includ | led in a parent company's Kentucky tax re | eturn as a disregarded | |
| company's information here (c | optional): | | |
| FEIN: Name | 3: | | |
| Principal Officers - List the | e name, address and title of all current officers. A | I organizations must list at least one (1) |) officer, even in the case of a sole officer. If not |
| specified, officer addresses default to | o the principal office address. Corporations are rec | uired to list a Secretary or other officer | serving as records custodian |
| | KAREN S WIX | • <u></u> | |
| Treasurer | RAY WELLS | | |
| | | | ······································ |
| | | | |
| Directors - Non-profit corporat | ions must have at least three (3) directors. All direc | tors of the non-profit must be listed. If n | not specified, director addresses default to the principal |
| office address. | (,) | | · · · |
| BLAKLEY WINSTEAD | | | - · · |
| DANNY WIX | | | |
| PAUL LAMB | | | |
| | | | |
| | | | |
| | | | |

The above entity was administratively dissolved on October 9, 2017 because the entity did not file its annual report for the year 2017. 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 273.3181. 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 ABUNDANT GRACE FELLOWSHIP OF THE ASSEMBLIES OF GOD INC 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.

(Required)

10-24-17 Date (Required)

Title (Required)



DANIEL P. BORK Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

November 1, 2017

ABUNDANT GRACE FELLOWSHIP OF THE ASSEMBLIES OF GOD INC 360 SOUTH MAIN ST. P. O. BOX 1455 MADISONVILLE KY 42431

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **ABUNDANT GRACE FELLOWSHIP OF THE ASSEMBLIES OF GOD INC** is exempt from filing a Kentucky Corporation Income Tax Return pursuant to KRS 141.040, KRS 141.0401 and KRS 136.070. This exemption does not apply to any other taxes administered by the Commonwealth of Kentucky. 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 corporation. This letter is valid for 30 days from the date of this letter.

Any changes in the corporation's articles of incorporation, by-laws, method of reporting, name or address, or ruling by the Internal Revenue Service must be reported to this office.

Sincerely,

Rada REV6015, Taxpayer Services Specialist II Pass Through Entity Tax Branch 501 High Street, Mail Sta. 52 Frankfort, KY 40601 Phone# (502) 564-7336 FAX# (502) 564-0058

Kentucky Secretary of State organization number 0682849

