Drganization ID # 0577306 Commonwealth of Kentucky State of origin KY Michael G. Adams, Secretary of State 		L Michael G. Adams Kentucky Secretary of State Received and Filed: 7/1/2021 1:51 PM Fee Receipt: \$130.00	
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		RST
Exact limited liability company nam SHIELD OF FAITH, LLC P O BOX 22 LOWMANSVILLE KY 41232		name/office add form. When reins addresses until th reinstatement is f	Fice address and registered agent ress cannot be changed on this stating, you cannot modify the ne reinstatement is filed. Once the lied, the statement of change can be os:\web.sos.ky.gov\ftsearch or can om our website.
Registered Agent and Registered C DENISE CAMIC 109 SIXTH STREET ASHLAND, KY 41101 f the above company is included in a par company's information here (optional): EIN: Name:	Office Address ent company's Kentucky tax return as a disregarde		
<b>Nembers</b> - List the name And address of th LCs are not required to list their members.	e limited liability company's members. If not specified, address	es default to the LLC's pri	incipal office address Member-managed
DENISE SKAGGS CAMIC	174 SECRETARIAT DRIVE HARROD	SBURG, KY 40330-7	508

The above entity was administratively dissolved on October 8, 2020 because the entity did not file its annual report for the year 2020. 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 \$130.00, 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 SHIELD OF FAITH, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

please provide a Declaration of Power of Attorney with the Reinstatement Application. If not ap officer of said entity

Х UMI MANAGER Title (Required)

Signature of member Or manager (Required)

06/28/2021 Date (Required) balimonos

0577306.06



SHIELD OF FAITH, LLC
P O BOX 22
LOWMANSVILLE KY 41232

Notice Date:	July 1, 2021
KY SoS Org. ID:	0577306

RE:	Letter of Good Standing Request - Approved You requested a letter of good standing, and your entity is in <b>good</b> <b>standing</b> with the Department of Revenue.	
SUMMARY		
OUR DETERMINATION	We verified the following information.	
	<ol> <li>You are registered with the Department of Revenue.</li> <li>An authorized person requested this letter.</li> <li>You filed income and LLE tax returns as required, or you are exempt from filing.</li> <li>You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.</li> </ol>	
	This notice will remain current for 30 days from the notice date above.	
WHAT YOU NEED TO DO	<ol> <li>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.</li> </ol>	
	<ol> <li>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.</li> <li>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.</li> </ol>	
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you.	
	Agent: Tonja REV3883, Taxpayer Services Specialist II Email: Tonja.Lilly@ky.gov Direct: 502-564-7289	