Organization ID # 00	59611					0958614.0)9 dwilliams NPRF
Organization ID # 0958614Commonwealth of KentuckyState of originKYFiling fee \$115.00Michael G. Adams, Secretary of State						Michael G. Adams Kentucky Secretary of State Received and Filed:	
Michael G. Adan Secretary of Sta		Reinstate	ement A	oplicatio	n and	12/18/2020 10:2 Fee Receipt: \$1	
Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov Physical Application and L Reinstatement Application and L Reinstatement Application and L For the year 2020							RST
Exact organization name PLEASANT VAL 1020 WEST MA LEXINGTON KY	LEY UNIT 4 H	I <u>office address</u> OMEOWNERS ASS	OCIATION, IN	I C.	name/office add form. When rein addresses until t reinstatement is	filce address and regis dress cannot be chang istating, you cannot moc he reinstatement is filed filed, the statement of cl p.sos.ky.gov/ftsearch n our website.	ged on this dify the d. Once the change can be
Registered Agent and R STEWART R. M 1020 WEST MAI	CINTOSH N STREET	<u>ce Address</u>				e // e 1)	
	uded in a parent (optional): ne:		<u> </u>	·:			nt
Principal Officers - List specified, officer addresses default	t to the principal offi	ce address. Corporations a	ers. All organization re required to list a	is must list at least o Secretary or other of	ficer serving as	en in the case of a sole in records custodian	
Secretary	DAVID ABN						<u> </u>
Vice President	STEWART				·	<u>.</u>	
President	JOE PALUM	IBO	<u> </u>				
Directors - Non-profit corpora	ations must have at	least three (3) directors. Al	l directors of the no	n-profit must be liste	d. If Not specifie	d, director addresses de	afault to the principal
JOE PALUMBO	•				n in the second	• • •	
STEWART MCINTOSH						1	
DAVID ABNER		11 7 4					
					у. Д	· · · · · · · · · · · · · · · · · · ·	
						162	
		·····					
The above entity was adm The undersigned states th requirements of KRS 273.	at the grounds	for dissolution eithe	r did not exist	or have been e	liminated, ar	nd the entity's nam	e year 2020. The satisfies the
Under penalty of perjury, t information pertaining to F reinstatement pursuant to	he below sign PLEASANT VA	ed hereby authorizes	the Kentucky	Department of	Revenue to	release any applic	cable tax as required for
If not an officer of said ent	tity nlease pro	vide a Declaration of			einstatemen	t Application	

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Signature of officer Or chairman of the board (Required)

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Title (Required)

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2*0* Date (Required)



PLEASANT VALLE ASSOCIATION, INC 3151 BEAUMONT C LEXINGTON KY 40	ENTRE CIR, B100	Notice Date: KY SoS Org. ID:	December 18, 2020 0958614			
RE:	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. You are registered with the Department of Revenue. An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing. 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. 					
WHAT YOU NEED TO DO	 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. 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. 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: Tonja REV3883, Taxpayer Services Specialist II Email: Tonja.Lilly@ky.gov Direct: 502-564-7289					