P. O. Box 718 Frankfort, KY 40602-0718	Reinstatement Applica		Received and Filed: 11/16/2022 7:48 AM		
(502) 564-3490 http://www.sos.ky.gov	Image: State State 18 02-0718Reinstatement Application andFee Receipt: \$130.00Reinstatement Annual Report For the years 2021 through 2022RS I				
xact limited liability company name and p HARMONY HOUSE FOR WOMEN I 2110 MARYLAND AVE COVINGTON KY 41014		name/office add form. When rein addresses until t reinstatement is	ffice address and registered agent dress cannot be changed on this istating, you cannot modify the the reinstatement is filed. Once the filed, the statement of change can be tps:/web.sos.ky.gov/ftsearch or can rom our website.		
Agent and Registered Office Agent and Registered Office Agent and Registered Office Agent		FFIN (Onti	onal) 		
Iembers - List the name And address of the limited lia Cs are not required to list their members. M.t.o. Harmen	ability company's members. If not specified, addresses	default to the LLC's p	rincipal office address Member-managed		
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		2 \$. 			

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 Harmony House for Women Limited Liability Company 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	Max Harmon	sole membe	9/12/22
Signa	ture of memoer Or manager (Required)	Title (Required)	Date (Required)



Harmony House for Women Limited Liability Company	Notice Date:	November 14, 2022
2110 Maryland Ave	KY SoS Org. ID:	1117216
Covington KY 41014		

RE:	Letter of Good Standing Request - Approved			
SUMMARY	You requested a letter of good standing, and your entity is in <b>good standing</b> with the Department of Revenue.			
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> <li>This notice will remain current for 30 days from the notice date above.</li> </ol>			
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> <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: Bruce REV3968, Taxpayer Services Specialist II Direct: 502-564-2038			