Organization ID # 0510527 State of origin KY Filing fee \$115.00 Aliso	Commonwealt on Lundergan Grim		av	0510527 Alison Lunde Kentucky Se Received and 12/6/2019 9:: Fee Receipt:	ergan Grime cretary of St d Filed: 22 AM	
Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatemen Reinstatemer For the				RST	
Exact organization name and pri STONE RIDGE HOME OV PO BOX 213 BUCKNER KY 40010 Registered Agent and Registered	WNERS ASSOCIATION, INC.		The principal offin name/office addrr form. When reinst addresses until the reinstatement is fild filed online at <u>app.</u> downloaded from o	ess cannot be cha ating, you cannot m reinstatement is fil ed, the statement o sos.ky.gov/ftsearc	nged on this 10dify the led. Once the f change can be	
CYNTHIA KOLB 4214 WINDING CREEK R CRESTWOOD, KY-40014 If the above company is included in a p	<u>کا</u>				÷	
company's information here (optional): FEIN: Name:						
Principal Officers - List the name, ac specified, officer addresses default to the princi	Idress and title of all current officers. All organized office address. Corporations are required	anizations must list at least o to list a Secretary or other o	one (1) officer, even	in the case of a so cords custodian	le officer. If not	
Secretary MELISS	SA GOWEN					
<u> </u>						
Directors - Non-profit corporations must h office address,	ave at least three (3) directors, All directors (of the non-profit must be list	ed. If Not specified,	director addresses	default to the prir	ncipal
CYNTHIA KOLB						
MELISSA GOWEN						
MARK LORANGER		· · · · · · · · · · · · · · · · · · ·				
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The above entity was administrative The undersigned states that the gro requirements of KRS 273.3181. En	ounds for dissolution either did no	t exist or have been e	eliminated, and	the entity's na	r the year 20 ame satisfies	19. the
Under penalty of perjury, the below information pertaining to STONE R reinstatement pursuant to KRS 271	IDGE HOME OWNERS ASSOCIA	ATION, INC. to the Se	f Revenue to re ecretary of Stat	lease any app e, as required	licable tax for	:-
If not an officer of said entity, pleas			Reinstatement	Application.		
Xatablee	Troas	acter			4/19	
Signature of Signature of the b	oara (kequired)	Title (Required)	· · · ·	Dai	le (Required)	

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ที่ 👘 แปล ค.ศ. (พ.ศ. พระพบติสารณ์ และสารณ์ และสารณ์ และพระพบติสารณ์ พระพบติมาณ์ พระพบติสารณ์ เป็นสารณ์ เพราะ (พระพบติสารณ์)
De de la companya de
». به معلومها با مانهم وما مانه ما مروح بالا مروح المراجع مانه والمراجع مانه المانية من المانية المراجع المراجع مانيا مانية المراجع ا
en en la companya de



STONE RIDGE HOME OWNERS ASSOCIATION, INC.	Notice Date:	December 5, 2019
PO BOX 213	KY SoS Org. ID:	0510527
BUCKNER KY 40010		

<i>RE</i> :	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: Nicole REVX129, Taxpayer Services Specialist II Email: Nicole.McTiernan@ky.gov Direct: 502-564-2062			