Organization ID # 0900135 State of origin KY Filing fee \$160.00 <b>Alisor</b>	Commonwealth of Kentucky n Lundergan Grimes, Secretary of St		Received and Filed:	
Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Application and Reinstatement Annual Report For the years 2015 through 2018			Fee Receipt: \$160.00
Exact organization name and princ TRAIL OF TEARS MEMOR 1190 JOHN RIVES ROAD HOPKINSVILLE KY 42240			name/office form. When addresses u reinstatemer filed online a	al office address and registered agent address cannot be changed on this reinstating, you cannot modify the nitil the reinstatement is filed. Once the at is filed, the statement of change can be t app.sos.ky.gov/ftsearch or can be from our website.
Registered Agent and Registered C LORI OLP 1190 JOHN RIVES ROAD HOPKINSVILLE, KY 42240 If the above company is included in a pa company's information here (optional): FEIN: Name:		x return as a disregarde		
Principal Officers - List the name, add specified, officer addresses default to the principal				
President LAR	ey Swinney	206 JORD	AN ST	HOPKINSVILLE KY 42240
Vice-President	· · ·			

DONNA MITCHELL 206 JORDAN ST, HOPKINSVILLE KY 42240 206 JORDAN ST, HOPKINSVILLE KY 42240 Secretary MITCHELL Treasurer DONNA

Directors - Non-profit corporations must have at least three (3) directors. All directors of the non-profit must be listed. If not specified, director addresses default to the principal office address.

LARRY SWINNEY	206 JORDAN ST, HOPKINSVILLE, KY 42240
DONNA MITCHELL	206 JORDANST, HOPKINKVILLE, KY 422.40
LAVADA SATTERFIELD	10665 CO RD 17, WOODVILLE, AL 35776
RYAN SATTERFIELD	10665 CORD 17 WOODVILLE AL 35776
LANCE CUR	1498 MILLS RB WILMINGTON, OH 45177

The above entity was administratively dissolved on September 12, 2015 because the entity did not file its annual report for the year 2015. 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 \$160.00, 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 TRAIL OF TEARS MEMORIAL ASSOCIATION, 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.

SECRETARY - TREASURY nature of officer or chairman of the board ( Required) Required

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## TRAIL OF TEARS MEMORIAL ASSOCIATION, INC.Notice Date:<br/>KY SoS Org. ID:September 19, 2018<br/>09001351190 JOHN RIVES ROADKY SoS Org. ID:0900135HOPKINSVILLE KY 42240KY SoS Org. ID:0900135

RE:	<i>Letter of Good Standing Request - Approved</i> 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> <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: John REV3858, Revenue Auditor I Email: John.Cornett@ky.gov Direct: 502-564-2099			