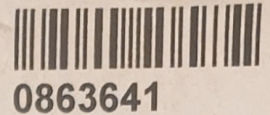


Organization ID # 0863641  
State of origin KY  
Filing fee \$130.00

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State



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  
Reinstatement Annual Report  
For the years 2021 through 2022

RST

**Exact limited liability company name and principal office address**

KINGDOM FINANCIAL, LLC  
406 CLAY DRIVE  
RICHMOND KY 40475

The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at <https://web.sos.ky.gov/itsearch> or can be downloaded from our website.

**Registered Agent and Registered Office Address**

WILLIAM BERRYMAN  
409 TOBIANO DR.  
RICHMOND, KY 40475

**FEIN (Optional)**

46-3308731

If the above company is included in a parent company's Kentucky tax return as a disregarded entity or a subsidiary, please provide the parent company's information here (optional):

FEIN: \_\_\_\_\_ Name: \_\_\_\_\_

**Members -** List the name And address of the limited liability company's members. If not specified, addresses default to the LLC's principal office address.. Member-managed LLCs are not required to list their members.

WILLIAM EDWARD BERRYMAN

The above entity was administratively dissolved on October 18, 2021 because the entity did not file its annual report for the year 2021. 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 KINGDOM FINANCIAL, LLC 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   
Signature of member Or manager (Required)

Agent

Title (Required)

4-21-22  
Date (Required)