Organization ID # 0852342 Commonwealth of Kentucky
State of origin KY
Filing fee \$175.00 Alison Lundergan Grimes, Secretary of Sta

0852342.09 mstratton NPRF

Alison Lundergan Grimes Kentucky Secretary of State Received and Filed:

8/21/2018 12:10 PM Fee Receipt: \$175.00

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 2014 through 2018

RST

Exact organization name and principal office address KENTUCKY EPSILON CHAPTER OF SIGMA ALPHA EPSILON INCORPORATED 410 ROSE LANE LEXINGTON KY 40508				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 app.sos.kv.gov/ftsearch or can be downloaded from our website.			
CLARK RHEA 2308 NEWMA LOUISVILLE, I If the above company is in company's information he	(Y 40222 cluded in a parent company's Kentuc		egarded				
Principal Officers - Li specified, officer addresses defe	st the name, address and title of all current ault to the principal office address. Corporation	officers. All organizations mons are required to list a Sec	ust list at leas retary or othe	t one (1) o r officer se	fficer, eve	n in the ca	ase of a sole officer. If not stodian
President	Samuel White	410	hose	100	lex	Ky	40508
Vice-President	Jeffor specie	<u>UP</u>	Rose	Ini	lex	K 4	U0508
Secretary	Michibal Witcher	731	Folest	Park	Les	54	40503
Treasurer	Jumpl Woulds	ylo	Rise	ln.	lex	ry'	4.508
office address. Joe Andurson Chase Johnson Benjamin Geat	\$						
2014. The undersigned	dministratively dissolved on Septe states that the grounds for dissol its of KRS 273.3181. Enclosed is	ution either did not ex	rist or hav	e been e	elimina:	ed, and	the entity's name
information pertaining to	t, the below signed hereby author KENTUCKY EPSILON CHAPTE ment pursuant to KRS 271B.14-2	R OF SIGMA ALPHA	partment EPSILO	of Reve N INCOI	nue to	release TED to	any applicable tax the Secretary of State,
If not an officer of said e	entity, please provide a Declaratio	on of Power of Attorne	y with the	Reinsta	atemen	Applica	ation.
x posed /	loods	Treswer					08/21/201
Signature of officer or ch	airman of the board (Required)		(Required)				Date (Required)

Website: www.revenue.kv.gov Phone: 502-564-8139

502-564-0058 Fax:

KENTUCKY EPSILON CHAPTER OF SIGMA ALPHA Notice Date: August 21, 2018 KY SoS Org. ID: **EPSILON INCORPORATED** 0852342 **410 ROSE LANE LEXINGTON KY 40508**

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.

1. You are registered with the Department of Revenue.

2. An authorized person requested this letter.

- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 4. 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 1. 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.
 - 2. **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.
 - 3. 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: John REV3858, Revenue Auditor I

Email: John.Cornett@ky.gov

Direct: 502-564-2099