Organization ID # 0674 State of origin KY Filing fee \$160.00	²⁴⁴ Commonwealth of lison Lundergan Grimes,	Kentucky Secretary of Sta	0674244.09 vmille NPRI Lison Lundergan Grimes Centucky Secretary of State Leceived and Filed: /1/2019 1:44 PM ee Receipt: \$160.00
Alison Lundergan Grid Secretary of State P. O. Box 718 Frankfort, KY 40602-0 (502) 564-3490 http://www.sos.ky.ge	Reinstatement Aj Reinstatement A For the years 2016	Reinstatement Application and Reinstatement Annual Report For the years 2016 through 2019	
		name/office address of form. When reinstating addresses until the rein reinstatement is filed, th	ddress and registered agent cannot be changed on this), you cannot modify the statement is filed. Once the he statement of change can be <u>kv.gov/ftsearch</u> or can be vebsite.
Registered Agent and Reg MARY F. ZRINY 1521 SLOAN'S VA BURNSIDE, KY 42 If the above company is includ company's information here (or FEIN: Name	ILLEY ROAD 2519 led in a parent company's Kentucky tax return as a d iptional):	lisregarded	
specified, officer addresses default to	e name, address and title of all current officers. All organization the principal office address. Corporations are required to list a MARY F ZRINY	ns must list at least one (1) officer, even in t Secretary or other officer serving as record	ne case of a sole officer. If not s custodian
			<u> </u>
	DON WILDING		
	JOE GROTE	· · · · · · · · · · · · · · · · · · ·	
Treasurer		on-profit must be listed. If Not specified, dire	ctor addresses default to the principal

DUDLEY HORSCH

JOE GROTE

The above entity was administratively dissolved on October 1, 2016 because the entity did not file its annual report for the year 2016. 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 FRIENDS OF SLOAN'S VALLEY, KENTUCKY, 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.

ignature of officer Or Mairman of the board (Required)

ector Title (Required)

3 28

Date (Required)



FRIENDS OF SLOAN'S VALLEY, KENTUCKY, INC.Notice Date:April 1, 20191521 SLOAN'S VALLEY ROADKY SoS Org. ID:0674244BURNSIDE KY 42519KY 2519KY SoS Org. ID:0674244

<i>RE</i> :	Letter of Good Standing Request - Approved You requested a letter of good standing, and your entity is in good standing with the Department of Revenue.		
SUMMARY			
OUR DETERMINATION	N 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: Stephanie REVX219, Taxpayer Services Specialist II Email: Stephanie.Brown@ky.gov Direct: 502-564-2028		