Organization ID # 0837147 State of origin Filing fee \$115.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

Michael G. Adams **Kentucky Secretary of State** Received and Filed: 12/2/2021 9:05 AM

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 Fee Receipt: \$115.00 **Reinstatement Annual Report** For the year 2021

Exact organization name and principal office address	Exact organization	name and	principal	office address
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L.L.C. KINDOM MINISTRY CENTER, INC.

The principal office address and registered agent name/office address cannot be changed

530 OLD MAJ HOPKINSVILL			on this form. When reinstating, you ca modify the addresses until the reinstate filed. Once the reinstatement is filed, th statement of change can be filed online \web.sos.ky.gov\ftsearch or can be do from our website.	ment is e at <u>https:</u>
	Registered Office Address			7
STEVE PECK 530 OLD MAJO	사용하는 사용물론이 가지, 기록하게 되었다. 수입 (A.			
HOPKINSVILL				<u>} </u>
f the above company is in company's information her	cluded in a parent company's Kentu	cky tax return as a disregarde		ent
	sses default to the principal office addres		t at least one (1) officer, even in the case of cretary or other officer serving as records o	
President	JIMMY GARRETT			
Secretary	STEVE PECK	<u> </u>		
Treasurer	STEVE PECK			·
Vice President	F. CLARK WHEELER			
Directors - Non-profit corthe principal office address.	porations must have at least three (3) dir	ectors. All directors of the non-profit m	ist be listed. If Not specified, director addre	sses default to
WILLIAM E. YOAKUN	N .			
CLARK WHEELER				
CINDY PECK				
2021. The undersigned	f states that the grounds for dis	solution either did not exist or h	ity did not file its annual report for t ave been eliminated, and the enti 15.00, payable to Kentucky State	ty's name
			nt of Revenue to release any applicate, as required for reinstatemen	
x Chun	entity, please provide a Declarate Dawb hairman of the board (Required)	ion of Power of Attorney with the fles i de with the Title (Required)	11-1	/ - 21 Required)

Website: www.revenue.ky.gov Phone: 502-564-8139 Fax: 502-564-0058

L.I.C. KINDOM MINISTRY CENTER, INC. 530 OLD MAJOR LANE **HOPKINSVILLE KY 42240**

Notice Date:

December 1, 2021

KY SoS Org. ID: 0837147

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: Bruce REV3968, Taxpayer Services Specialist II

Direct: 502-564-2038