nization ID # 1303849 e of origin KY g fee \$115.00 Mich	Commonwealth of Kentucky nael G. Adams, Secretary of St	KY Secreta	Michael G. Adams	
Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatement Application Reinstatement Annual Re For the year 2024	Det		
GRACEFUL MOON BIRTH AND WELLNESS LLC and an age and ag		e principal office address and register ent name/office address cannot be cha this form. When reinstating, you cannot dify the addresses until the reinstatement d. Once the reinstatement is filed, the tement of change will be filed.		
egistered Agent and Register Amanda N Moss 1333 Centre Pkwy #36 Lexington, KY 40517			go inn 20 incu	
County: Business size: Business type:	FAYETTE Small Educational Services	Z		

The above entity was administratively dissolved on 10/12/2024 because the entity did not file its annual report for the year 2024. 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 14A.3-010; and that the entity has taken no steps to wind up and liquidate its business and affairs.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to GRACEFUL MOON BIRTH AND WELLNESS LLC to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Amanda Moss Title: Owner 12/9/2024



**GRACEFUL MOON BIRTH AND WELLNESS LLC** 1333 Centre Pkwy #36 Lexington KY, 40517

Notice Date: KY SoS Org. ID: 1303849

December 9, 2024

RE:	Letter of Good Standing Request - Approved	
SUMMARY	You requested a letter of good standing, and your entity is in <b>good standing</b> with the Department of Revenue.	
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> <li>This notice will remain current for 30 days from the notice date above.</li> </ol>	
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>	
AGENT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Angie Morris Direct: 502-564-7327	