Organization ID # 0725350 State of origin

**Commonwealth of Kentucky** Filing fee \$115.00 Alison Lundergan Grimes, Secretary of St

0725350.09

**NPRF** 

Alison Lundergan Grimes

**Kentucky Secretary of State** Received and Filed: 11/2/2017 12:44 PM Fee Receipt: \$115.00

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 year 2017

Exact or	gan	<u>ization</u>	name and	principal	office addres	S

HOPE LIFE CENTER, ASSEMBLY OF GOD INC

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

P.O. BOX 19 LOUISVILL		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 <u>app.sos.ky.gov/ftsearch</u> or can be downloaded from our website.		
Registered Agent a	nd Registered Office Address	FEIN (Optional)		
	CARTER JR.	Tant (o passing)		
504 FAIRDA	ALE RD			
FAIRDALE,		e transferig		
	s included in a parent company's Kentucky tax return as a	disregarded		
company's information FEIN:				
specified, officer addresses	default to the principal office address. Corporations are required to list	ons must list at least one (1) officer, even in the case of a sole officer. If not a Secretary or other officer serving as records custodian		
President	JOE GIRDLER			
Vice President	GEORGE RHYE			
Secretary	STAN HOLDER			
office address.	corporations must have at least three (3) directors. All directors of the	non-profit must be listed. If not specified, director addresses default to the principal		
JOE GIRDLER				
GEORGE RHYE				
STAN HOLDER				
ROBERT C CARTE	RJR			
The undersigned stat	administratively dissolved on October 9, 2017 beca tes that the grounds for dissolution either did not exis 273.3181. Enclosed is a check in the amount of \$1	use the entity did not file its annual report for the year 2017. It or have been eliminated, and the entity's name satisfies the		
•		•		
Under penalty of perj information pertaining pursuant to KRS 271	g to HOPE LIFE CENTER, ASSEMBLY OF GOD INC	ty Department of Revenue to release any applicable tax  C. to the Secretary of State, as required for reinstatement		
If not an officer of sai	d ≰ntity, please provide a Declaration of Power of At	tomey with the Reinstatement Application.		
X Rober	1 Cad Q	Paoto2 10-25-17		

X	Robert Cast Q_	Paotos	10-25-17
	Signature of officer or chairman of the board (Required)	Title (Required)	Date (Required)



DANIEL P. BORK
Commissioner

## FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

November 2, 2017

HOPE LIFE CENTER, ASSEMBLY OF GOD INC. P.O. BOX 197206 LOUISVILLE KY 40259

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **HOPE LIFE CENTER**, **ASSEMBLY OF GOD INC.** is exempt from filing a Kentucky Corporation Income Tax Return pursuant to KRS 141.040, KRS 141.0401 and KRS 136.070. This exemption does not apply to any other taxes administered by the Commonwealth of Kentucky. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the corporation. This letter is valid for 30 days from the date of this letter.

Any changes in the corporation's articles of incorporation, by-laws, method of reporting, name or address, or ruling by the Internal Revenue Service must be reported to this office.

Sincerely,

Ramon REV4636, Taxpayer Services Specialist I Pass Through Entity Branch 501 High Street, Mail Station 52 Frankfort, KY 40601 Phone# (502) 564-2169 Fax# (502) 564-0058

Kentucky Secretary of State organization number 0725350

