ganization ID # 12016 te of origin KY ng fee \$115	Commonw	ms, Secretary of St	PRP 1201650 Michael G. Adams KY Secretary of State Received and Filed 11/30/2023 6:57:08 AM	
Michael G. Adam Secretary of Stat P. O. Box 718 Frankfort, KY 40602- (502) 564-3490 http://www.sos.ky.g	e Reinsta ₀₇₁₈ Reinst	Reinstatement Application Reinstatement Annual Rep For the year 2023		\$115.00 RST
Exact organization name and principal office address LACEY ACRES INCORPORATED 40 INDIAN SPRINGS SHELBYVILLE KY 40065		agent on this modify filed. C	The principal office address and registerer agent name/office address cannot be chan on this form. When reinstating, you cannot modify the addresses until the reinstatement filed. Once the reinstatement is filed, the statement of change will be filed.	
DEBORAH CAR 40 indian springs shelbyville, KY 4	s 40065	TH OF		
		e address. Corporations are required to list a secret 40 INDIAN SPRINGS T 40065	etary or other offic	er serving as record

The above entity was administratively dissolved on 10/4/2023 because the entity did not file its annual report for the year 2023. 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 LACEY ACRES Incorporated to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Mike Carey Title: President 11/30/2023



LACEY ACRES Incorporated 40 indian springs shelbyville KY, 40065

Notice Date:	November 30, 2023
KY SoS Org. ID:	1201650

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. 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		
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: James REVE277, Taxpayer Services Specialist III Email: James.Sutherland@ky.gov Direct: 502-564-7359	



COMMONWEALTH OF KENTUCKY OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH EMPLOYER STATUS SECTION P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 <u>https://kewes.ky.gov</u> UITax@KY.GOV

Date: 11/29/2023

LACEY ACRES Incorporated

Dear Sir/Madam:

KRS 14A.7-030(1)(f) CERTIFICATE

The Office of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Samantha Tabor Office of Unemployment Insurance PO Box 948 Frankfort, Kentucky 40602-0948 Phone: (502) 564-2272 Email: UITax@KY.GOV

Kentucky Secretary of State organization number 1201650

