Organization ID # 0975853 State of origin KY Filing fee \$160.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0975853.06

dwilliams LRPF

Michael G. Adams Kentucky Secretary of State Received and Filed:

4/27/2021 10:52 AM Fee Receipt: \$160.00

RST

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 Reinstatement Annual Report For the years 2018 through 2021

Exact limited liability company name and principal office address
COMMONWEALTH HOUSING, LLC
38 CRYSTAL LAKE DRIVE
COVINGTON KY 41017

The principal office address and registered agent name/office address cannot be changed on this 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 app.sos.ky.gov/ftsearch or can be downloaded from our website.

		downloaded from our website.				
JAMES F 38 CRYS COVING	t and Registered Office Add RETTIG TAL LAKE DRIVE TON-KY 41017 by is included in a parent compa		roturn ac a	dierogard		
company's informati		my's Remucky lax	ietum as a t	nsregard	ert Cross in	
Members - List the	e name And address of the limited liab	oility company's memb	ers. If not speci	fied, addresses defaul	t to the LLC's principal office	e address., Member-managed
James Rettig	f	38 Crystal Lak	e Drive, Fort	Mitchell KY 41017		
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	t to the total		•		18 - 4 - 4 - 4	
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		, ,	J. S. S.			7
The undersigned s	vas administratively dissolve states that the grounds for di RS 275.295. Enclosed is a c	ssolution either	did not exist	or have been eli	iminated, and the en	tity's name satisfies the
Under penalty of p information pertair 271B.14-220.	erjury, the below signed here ning to COMMONWEALTH F	eby authorizes the HOUSING, LLC t	ne Kentucky o the Secre	Department of I tary of State, as	Revenue to release a required for reinstate	any applicable tax ement pursuant to KRS
If not an officer of	said entity, please provide a	Declaration of P	ower of Atto	orney with the Re	einstatement Applica	tion.
X		Member			4/2	23/2021
Signature of	f member Or manager (Required)	t gate of		Title (Required)		Date (Required)

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

SCHWEITZER TAXES & INSURANCE 4135 ALEXANDER PIKE #205 COLD SPRING KY 41076

Notice Date: April 27, 2021 KY SoS Org. ID: 0975853

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.

An authorized person requested this letter.

3. You filed income and LLE tax returns as required, or you are exempt from

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
 - 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