Organization ID # 0 State of origin F Filing fee \$115.00	vealth of Kentucky ams, Secretary of State			Kentucky Secretary of State Received and Filed: 1/8/2021 3:21 PM Fee Receipt: \$115.00					
Michael G. Adams Secretary of State		Reinstatement Application and Reinstatement Annual Report For the year 2020							
P. O. Box 7 Frankfort, KY 406 (502) 564-34 http://www.sos.k							K	51	
Exact organization na LAMBDA LAM FRATERNITY 1504 CHESNI BOWLING GR	IBDA ZETA I JT ST.	HOUSE CORF		OF LAMBDA	CHI ALPHA	name/office add form. When rein addresses until t reinstatement is	ffice address and r dress cannot be ch istating, you cannot he reinstatement is filed, the statement <u>p.sos.ky.gov/ftsea</u> n our website.	anged on modify the filed. Once of change	this e e the can be
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		BOWLING-G	REEN-KY-4	12101					
BOWLING GR	REEN KY 42	1 <b>01</b> 2 - CMUSE	꽃을 물을 물려 주요.	) – September songer Ste 17					
If the above company is in			Kentucky ta	x return as a o	disregarde				nt
company's information he FEIN: N	re (optional): Name:		2		* <u>2</u> * -				
r Env /	vaine						•		
Principal Officers - L specified, officer addresses def	ist the name, ad ault to the princip	dress and title of a al office address. C	I current officer: Corporations are	s. All organizatio required to list a	ns must list at least Secretary or other	one (1) officer, ev officer serving as	en in the case of a s records custodian	ole officer.	. lf not
President		SS DINWIDD			,				
Secretary	DEREK	LANHAM	·····	- Au					
Treasurer	JOSHUA	NEWMAN							
Vice President	JOHNN	/ DOUGLAS							
Directors - Non-profit corr office address.	porations must ha	ave at least three (3	) directors. All d	lirectors of the no	pn-profit must be lis	ted. If Not specifie	d, director addresse	es default to	o the principal
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DEREK LANHAM						A			
JOHNNY DOUGLAS							화가 없다.		
LEE ROSS DINWIDD	)IE & HALLAN		Č., :	S. Mgl :					
JOSHUA NEWMAN		1 14	D)		and and and	، به ۹ محمد ا			
The above entity was a The undersigned states requirements of KRS 2	s that the gro 73.3181. Enc	ly dissolved or unds for dissol losed is a che	ution either ck in the am	did not exist	or have been 5.00, payable t	eliminated, ar o Kentucky Sl	nd the entity's r ate Treasurer.	name sa	itisfies the
Under penalty of perjur	y, the below	signed hereby	authorizes t	the Kentucky		of Revenue to	release any ap	plicable	tax

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information pertaining to LAMBDA LAMBDA ZETA HOUSE CORPORATION OF LAMBDA CHI ALPHA FRATERNITY to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220. If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application. X Signature of officer Or chairman of the board (Required) Title (Required)

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## LAMBDA LAMBDA ZETA HOUSE CORPORATION OF Notice Date: LAMBDA CHI ALPHA FRATERNITY P.O. BOX 743 BOWLING GREEN KY 42135

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>					
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Tonja REV3883, Taxpayer Services Specialist II Email: Tonja.Lilly@ky.gov Direct: 502-564-7289					