Organization ID # 0923469 State of origin

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

0923469.09

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Alison Lundergan Grimes

Kentucky Secretary of State Received and Filed: 10/26/2017 1:18 PM Fee Receipt: \$115.00

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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 organization name and principal office ad	dress
HOUSE OF GRACE KENTUCKY, INC.	
9404 ALLEY BRANCH	
CATLETTSRUPG KV 41129	

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.

Registered Agent and	Registered Office Addres	S		FEIN (Optional)	
GERARDO Mi 1557 WINCHE ASHLAND, K\ If the above company is ir company's information he	EJIA ESTER AVENUE / 41101 ncluded in a parent company's	Kentucky tax re	eturn as a disregarded	TENY (OPSIONAL)	:
	ist the name, address and title of all ault to the principal office address. Co				
President	GERARDO MEJIA				
Vice President	MIKE LAMBERT				
Secretary	MELISSA LAMBERT				
Treasurer	DENISSE POLLUS				
Directors - Non-profit corpofice address.	porations must have at least three (3)) directors. All direc	tors of the non-profit must be list	ted. If not specified, direct	or addresses default to the principal
DENISE PAULUS					
CHRIS FELLER					
MIKE LAMBERT					
			· · · · · · · · · · · · · · · · · · ·		
The undersigned states	dministratively dissolved on that the grounds for dissolu 73.3181. Enclosed is a chec	ution either did	I not exist or have been	eliminated, and the	entity's name satisfies the
	y, the below signed hereby a o HOUSE OF GRACE KEN				
If not an officer of said	entity, please provide a Dec	laration of Pov	ver of Attorney with the I	Reinstatement Appl	lication.
X Signature of officer or cl	nairman of the board (Required)	Vice	President Title (Required)		Date (Required)



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

October 26, 2017

HOUSE OF GRACE KENTUCKY, INC. 9404 ALLEY BRANCH CATLETTSBURG KY 41129

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **HOUSE OF GRACE KENTUCKY, 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,

Rada REV6015, Taxpayer Services Specialist II Pass Through Entity Tax Branch 501 High Street, Mail Sta. 52 Frankfort, KY 40601 Phone# (502) 564-7336 FAX# (502) 564-0058

Kentucky Secretary of State organization number 0923469

