Organization ID # 0967670 Commonwealth of State of origin KY Filing fee \$130.00 Alison Lundergan Grimes, Secretary of S

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Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 6/24/2019 1:33 PM Fee Receipt: \$130.00

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 years 2018 through 2019

RST

	'		
Exact organization name B.D. GIVING INC 2507 TALBOTT A LOUISVILLE KY	ORPORATED AVE	dress	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 Re	gistered Office Address	<u>5</u>	
Robert Hampton 2507 Talbott Ave Louisville, KY 402	Butler 205		
If the above company is inclu company's information here (FEIN:Nam	(optional):	Kentucky tax return as a di	sregard
specified, officer addresses default	to the principal office address. Co		must list at least one (1) officer, even in the case of a sole officer. If not secretary or other officer serving as records custodian
President	ROBERT BUTLER	·	
Secretary	ALESSANDRA BL		
Treasurer	MICHAEL SERRA	·····	
Vice President	FAUVE SOIANGE SIV	AN BUTLER	
Directors - Non-profit corpora office address. ANDREW BISHOP ROBERT BUTLER MICHAEL SERRA	tions must have at least three (3)	directors. All directors of the non	n-profit must be listed. If not specified, director addresses default to the princi
ALESSANDRA BL			
The undersigned states th	at the grounds for dissolu	ition either did not exist e	se the entity did not file its annual report for the year 201 or have been eliminated, and the entity's name satisfies the control of the con
Under penalty of perjury, tinformation pertaining to B 271B.14-220.	ne below signed hereby a .D. Giving Incorporated to	authorizes the Kentucky of State,	Department of Revenue to release any applicable tax as required for reinstatement pursuant to KRS
If not an officer of said ent	ity, please provide a Decl	laration of Power of Atto	mey with the Reinstatement Application.
X Palent H. But	Ter	president	05Jun19
Signature of officer or chair	nan of the board (Required)		itle (Required) Date (Required)

Website: www.revenue.kv.gov Phone: 502-564-8139

502-564-0058

B.D. Giving Incorporated 2507 Talbott Ave Louisville KY 40205

Notice Date: June 24, 2019 KY SoS Org. ID: 0967670

Fax:

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.

- 2. An authorized person requested this letter.
- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 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 date above.
 - 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

Email: Bruce.Owens@ky.gov

Direct: 502-564-2038