janization ID # 1 te of origin א ng fee \$130	(Commonwealth of Kentucky lichael G. Adams, Secretary of St		NPRF 1200674 Michael G. Adams KY Secretary of State Received and Filed	
Michael G. A Secretary of P. O. Box Frankfort, KY 40 (502) 564- http://www.sos	State 718 0602-0718 3490	Reinstatement Reinstatement For the years 20		2/6/2025 2:54:11 PM Fee receipt: \$130.00 and port RST	
LIVING GR CORPORATION 2885 LIBEI PROVIDEN Registered Agent CHRISTOP Pastor/Elde 2885 LIBEF	RTY RD ICE KY 42450 and Registere HER MARK Cl	JMMINS	age on t moo fileo	nt name/office a this form. When lify the addresses	address and registerec ddress cannot be chan reinstating, you cannot a until the reinstatement i atement is filed, the will be filed.
Principal Office	'S - List the name , ficer addresses defa	address and title of all current officers. A null to the principal office address. Corpora	All organizations must list at I tions are required to list a Se	east one (1) offic	er, even in the case of a fficer serving as records
Treasurer		HRISTINA BELT 33	7 WEDGEWOOD 450S		
Directors - Non-pro		have at least three (3) directors. All direct	ors of the non-profit must be	listed. If Not spe	cified, director addresse:
BRIDGET RENEE PRATT		301 US HWY 41A	301 US HWY 41A SOUTH, PROVIDENCE, KY 42450		
BRIDGET RENE	MISTI CHRISTINA BELT		337 WEDGEWOOD DRIVE, PROVIDENCE, KY 42450		
_	ABELT	337 WEDGEWO	OD DRIVE, PROV	<u>IDENCE, K</u>	Y 42450

County:	Webster	
Business size:	Small	
Business type:	Miscellaneous Services	

The above entity was administratively dissolved on 10/12/2024 because the entity did not file its annual report for the year 2024. 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 LIVING GRACE EVANGELICAL COMMUNITY CHURCH CORPORATION to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Chris Cummins Title: Pastor/Elder/Registered Agent 2/6/2025



CH 695	ING GRACE EVA URCH CORPORA HUNT RD RION KY, 42064	ANGELICAL COMMUNITY ATION	Notice Date: KY SoS Org. ID:	February 6, 2025 1200674		
RE:		Letter of Good Standing Request - Ap	proved			
SUMMAR	Y	You requested a letter of good standing, and your entity is in good standing with the Department of Revenue.				
OUR DET	ERMINATION	 We verified the following information. You are registered with the Departme An authorized person requested this You filed income and LLE tax returns filing. You have no outstanding tax assess Collections or have a valid pay agree This notice will remain current for 30 days 	letter. s as required, or you ments with the Divis ment in place.	sion of		
WHAT YO	U NEED TO DO	 of this letter to the Kentucky Secreta notice date above. 2. If you are a for-profit corporation, Secretary of State a letter of good st Unemployment Insurance. Their telep 3. If you are a non-profit entity, pleas tax returns with the Kentucky Attornet 	are a for-profit corporation, you will also need to provide the ary of State a letter of good standing from the Division of loyment Insurance. Their telephone number is 502-564-6835. are a non-profit entity, please remember to file a copy of your urns with the Kentucky Attorney General. The charity filing ments website is: http://ag.ky.gov/family/consumerprotection/			
AGENT INFORMA	TION	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				



LIVING GRACE EVANGELICAL COMMUNITY CHURCH CORPORATION 695 HUNT RD MARION KY, 42064

Notice Date: February 6, 2025 KY SoS Org. ID: 1200674

Direct: 502-564-7359