



State of Rhode Island  
Department of State - Business Services Division

# REINSTATEMENT

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R.I. DEPT. OF STATE  
BUS SVCS DIV

2023 NOV 14 A 11:41

1. Entity ID Number: <u>160270</u>	2. The name of the entity is: <u>Lionel Brown Ministries</u>																											
3. Date of Revocation: <u>09-13-2023</u>	4. Reason for Revocation: <u>Annual Report</u>																											
5. Entity Type: <u>Non-Profit Corporation</u>																												
6. The reinstatement requirements are: <table><tr><td><input checked="" type="checkbox"/> Annual Reports (# of reports) 1</td><td>(report filing fee) \$ 20</td><td>Total Fees \$ 20</td></tr><tr><td><input checked="" type="checkbox"/> Penalty fees (# of years) 1</td><td>(penalty fee) \$ 25</td><td>Total Fees \$ 25</td></tr><tr><td><input type="checkbox"/> Replacement filing fee \$</td><td></td><td></td></tr><tr><td><input type="checkbox"/> LOGS (Tax Good Standing)</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Legislative Act/Court Order</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Change of Agent Form (filing fee) \$</td><td></td><td></td></tr><tr><td><input checked="" type="checkbox"/> Change of Registered Office Form - NO FEE</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Certificate of Correction</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Amendment (name change required)</td><td></td><td></td></tr></table>		<input checked="" type="checkbox"/> Annual Reports (# of reports) 1	(report filing fee) \$ 20	Total Fees \$ 20	<input checked="" type="checkbox"/> Penalty fees (# of years) 1	(penalty fee) \$ 25	Total Fees \$ 25	<input type="checkbox"/> Replacement filing fee \$			<input type="checkbox"/> LOGS (Tax Good Standing)			<input type="checkbox"/> Legislative Act/Court Order			<input type="checkbox"/> Change of Agent Form (filing fee) \$			<input checked="" type="checkbox"/> Change of Registered Office Form - NO FEE			<input type="checkbox"/> Certificate of Correction			<input type="checkbox"/> Amendment (name change required)		
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7. Accompanied by																												

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BY VC57H