

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

KNLP

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Secretary of State
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Michael G. Adams
Secretary of State
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Statement of Qualification
(Domestic Limited Liability Partnership)

KNL

Pursuant to the provisions of KRS 362, the undersigned partnership submits the following statement:

Article I: The name of the partnership electing to be a limited liability partnership is

SS AUTOMOTIVE AND PERFORMANCE LIMITED LIABILITY PARTNERSHIP

Article II: The mailing address of the chief executive office of the limited liability partnership is

216 Tick Ridge Rd, Hawesville, KY 42348

Article III: The street address of the partnership's initial registered office in Kentucky is

216 Tick Ridge Rd, Hawesville, KY 42348

and the name of the initial registered agent at that office is **JUSTIN DOWELL**

Article IV: The above partnership elects to be a limited liability partnership.

We declare under penalty of perjury under the laws of the state of
Kentucky that the foregoing is true and correct

Name of partner: **GREGORY SHOCK**

Name of partner: **JUSTIN DOWELL**

Signature of individual signing on behalf of partner: **JUSTIN DOWELL**

Signature of individual signing on behalf of partner: **GREGORY SHOCK**

I, **JUSTIN DOWELL**, consent to serve as the Registered Agent on behalf of
the limited liability partnership.

Signature of Registered Agent or individual signing on behalf of the
company serving as Registered Agent:

JUSTIN DOWELL