

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

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Alison Lundergan Grimes
Secretary of State
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Alison Lundergan Grimes
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

Rogue Armament LLP

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

3177 HWY 641 North Side A, Benton, KY 42025

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

3177 HWY 641 North Side A, Benton, KY 42025

and the name of the initial registered agent at that office is **Rogue Armament**

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: **Rogue Armament**

Name of partner: **Rogue Armament**

Signature of individual signing on behalf of partner: **Jason Isaac Silvernail**

Signature of individual signing on behalf of partner: **Joe Burnley**

I, **Rogue Armament**, 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:

Jason Isaac Silvernail