

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902

1419205.06
Michael G. Adams
Secretary of State
Received and Filed
1/3/2025 12:00:00 AM
Fee receipt: \$90

Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:

1. The entity is a **limited liability company**.

2. The name of the entity is

STOCKMANS SUPPLY LLC

3. The name of the entity to be used in Kentucky is

STOCKMANS SUPPLY LLC

4. The state or country under whose law the entity is organized is **Mississippi**.

5. The date of organization is **12/4/2004** and the period of duration is **perpetual**.

6. The mailing address of the entity's principal office is

Po Box 1367, Starkville, MS 39760

7. The name of the initial registered agent is

Northwest Registered Agent LLC

and the street address of the entity's initial registered office in Kentucky is

212 N 2nd St Ste 100, Richmond, KY 40475

8. The names and business addresses of the entity's representatives:

Registered Agent	Northwest Registered Agent LLC	212 N 2nd St Ste 100, Richmond, KY 40475
Authorized Rep	AMBER CARPENTAR	Po Box 1367, Starkville, MS 39760
Authorized Rep	AMBER CARPENTAR	Po Box 1367, Starkville, MS 39760

9. This entity is managed by **Members**.

10. This filing will be effective on **Friday, January 3, 2025**.

This entity is **NOT** a tobacco retailer as defined by KRS 438.305(9).

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

Signature of individual signing on behalf of **AMBER CARPENTAR**

I, **TAYLOR NEWMAN**, consent to sign for **N Agent LLC** who serves as the Registered Agent entity on Friday, January 3, 2025.

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