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COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Michael G. Adams Kentucky Secretary of State Received and Filed: 5/25/2022 3:37 PM Fee Receipt: \$20.00

Pursuant to the provisions of KRS 365.015, the undersigned applies to assume a name and, for that purpose, submits the following statement: 1. The assumed name is: Ammerman Arms 2. The real name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed name: Ammerman Manufacturing Company Name must be identical to the real name on record with the Secretary of State.) 3. The entity type is (you must check one): a Domestic Ceneral Partnership a Domestic Ceneral Partnership a Domestic Cumited Liability Partnership a Domestic Business Trust a Domestic Corporation a Domestic Cumited Liability Company a Domestic Uninted Cooperative Association a Domestic Unincorporated Non-profit Association a Foreign Hightower Road Falmouth KY 4	Division of Business Filings Business Filings P.O. Box 718, Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Assumed Name (Domestic or Foreign Business Entity)		
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Ammerman Manufacturing Company Name must be identical to the real name on record with the Secretary of State.) 3. The entity type is (you must check one): a Domestic General Partnership a Foreign General Partnership a Domestic Limited Liability Partnership a Foreign General Partnership a Domestic Limited Deathership a Foreign General Partnership a Domestic Limited Deathership a Foreign Limited Liability Partnership a Domestic Limited Partnership a Foreign Business Trust a Domestic Corporation a Foreign Corporation a Domestic Limited Liability Company a Foreign Corporation a Domestic Limited Cooperative Association a Foreign Statutory Trust a Domestic Limited Cooperative Association a Foreign Unincorporated Non-profit Association a Domestic Unincorporated Non-profit Association a Foreign Unincorporated Non-profit Association 4. The entity is organized and existing in the state or country of KY 5. The mailing address is: 1943 Morgan Hightower Road Falmouth KY 41040 Street Address or Post Office Box Numbers City State Zip I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct. Street Address or Post Office Box Numbers Street Address or Post Office Box N	1. The assumed name is: Amm	erman Arms		•
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5. The mailing address is: 1943 Morgan Hightower Road Falmouth KY 41040 Street Address or Post Office Box Numbers City State Zip I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct. Charles Ammerman Incorporator 5.2422	3. The entity type is (you must cher a Domestic Genera a Domestic Limited a Domestic Limited a Domestic Busine ✓ a Domestic Corpor a Domestic Limited a Domestic Statuto a Domestic Statuto	ck one): al Partnership d Liability Partnership d Partnership ess Trust ration d Liability Company bry Trust d Cooperative Association	a Foreign General F a Foreign Limited L a Foreign Limited P a Foreign Business a Foreign Corporati a Foreign Limited L a Foreign Statutory a Foreign Limited C	iability Partnership Partnership Trust ion iability Company Trust Cooperative Association
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Charles Ammerman Incorporator 5-24-27	Street Address or Post Office Box	Numbers C	City State	e Zip
Change Changes Anniherman Theorporator	I declare under penalty of perjury			C-14-27
	Authorized Party Signature	Charles Ammerman Printed Name		Date