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 INR
Michael G. Adams
Kentucky Secretary of State
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COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

Form: INT	Interrogatories	
Business Filings Division P.O. Box 718 Frankfort, KY, 40602 (502) 564-3490 (502) 564-5687 (fax) www.sos.ky.gov	Entity Name: Rouleur Advising LLC Organization Number: 1074458 Mailing Date: November 22, 2024	This space for use by Secretary of State

The Secretary of State of the Commonwealth of Kentucky has reason to believe that the entity listed above (the Entity), filed of record with the Office of the Secretary of State, is subject to the provisions of KRS Chapter 14A. The Secretary of State hereby propounds the following written interrogatories pursuant to KRS 14A.1-030 and KRS 14A.1-040 in order to ascertain whether the Entity is subject to the provisions of KRS Chapter 14A and is in compliance therewith. These Interrogatories are propounded to the Entity at the Entity's principal office address of 801 Monroe St Newport, KY 41071 and shall be answered by any person authorized to answer on behalf of the Entity within thirty (30) days from the date of mailing listed above.

Answers shall be made in writing and under oath subject to the penalties that may be imposed by KRS 14A.1-050 and 14A.9-020. If you cannot answer these Interrogatories in full after exercising due diligence to secure the information to do so, so state and answer to the extent possible, specifying your inability to answer the remainder, by stating whatever information or knowledge you have concerning the unanswered portion and detailing what you did in attempting to secure the unknown information.

As used in these Interrogatories, "entity", "foreign entity", and "person" have the same meanings as set forth in KRS 14A.1-070. The terms "certificate of authority", "certificate of revocation", "revoke", "revocation", "transact business" and "transacting business" have the same meaning as those terms are used in KRS 14A, Subchapter 9.

INTERROGATORY NO. 1: As to the person(s) answering these Interrogatories, state:

- (a) Your name and any other names by which you have been known;
- (b) Your title or position with the Entity, if any;
- (c) Residence address;
- (d) Business address; and

(e) Length of time employed by, or acting as an agent or officer for the Entity, if applicable;

ANSWER:

- (a) Timothy Michael Duever
- (b) Member
- (c) 801 Monroe St., Newport KY, 41071
- (d) 801 Monroe St., Newport KY, 41071
- (e) since inception

INTERROGATORY NO. 2: State the business relationship between the person answering these interrogatories and the Entity, if any.

ANSWER: Member

INTERROGATORY NO. 3: The Entity is a foreign entity that was authorized to do business in Kentucky pursuant to a certificate of authority filed of record on October 14, 2019. That certificate of authority was revoked by a certificate of revocation filed of record on October 18, 2021. Please describe with particularity and by specific dates any and all payments, income, and activities performed by or on behalf of the Entity in Kentucky, if any, from the date the certificate of authority was filed until the date of revocation.

ANSWER:

Consulting services were performed through Rouleur in Ohio during the period 10/14/18 through 8/3/2020. Monthly invoices/payments were received during that period. 10/19 - \$15,109.00; 11/19 - \$16,731.74; 12/19 - \$14,748.19; 1/20 - 18,860.00; 2/20 - \$15,013.07; 3/20 - 16,215.00; 4/20 - \$19,665.00; 5/20 - \$17,365.00; 6/20 - \$15,295.00; 7/20 - 13,455.00; 8/20 - \$4,836.90
No services were performed by or income received through Rouleur during the period 8/3/202 through 10/18/2021.

INTERROGATORY NO. 5: Please describe with particularity and by specific dates any and all payments, income, and activities performed by or on behalf of the Entity in Kentucky, if any, after the date the certificate of revocation was filed.

ANSWER:

Rouleur restarted performing services in KY on 11/1/2023. Income was received 12/23 - \$36,666.00; 1/24 - \$18,333.00; 2/24 - \$18,333.00; 7/24 - \$54,999.00

The undersigned, being first duly sworn, acknowledges that the Secretary of State may take administrative action as a result of these answers and declares, under penalty of perjury, that the answers and information provided herein are true and correct.

Signature of Answering Party: [Handwritten Signature]

Date of Signature: 12/2/24

State of Kentucky

County of Campbell

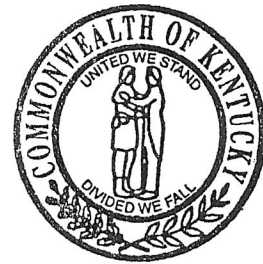
Signed and sworn to, or affirmed, before me this 2 day of December, 2024 by the Answering Party listed above.

[Handwritten Signature]
Notary Public Signature

Andrew Graus
Printed Name of Notary Public

My Commission Expires: 10/31/2026

Commission Number KYNP61345



ANDREW THOMAS GRAUS
Notary Public, Kentucky
State At Large
My Commission Expires
October 31, 2026
Notary ID# KYNP61345