

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

1351384.17
Michael G. Adams
Secretary of State
Received and Filed
3/20/2024 12:00:00 AM
Fee receipt: \$40

KNLP

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

Statement of Qualification
(Domestic Limited Liability Partnership)

KNL

Pursuant to the provisions of KRS 362.1-931, the undersigned partnership submits the following statement:

1. The name of the partnership electing to become a limited liability partnership is

FLEXCORE LLP

2. The mailing address of the chief executive office of the limited liability partnership is

836 Palatka Rd, Louisville, KY 40214

3. The street address of the partnership's initial registered office in Kentucky is

836 Palatka Rd, Louisville, KY 40214

and the name of the initial registered agent at that office is **ABDELHAFID MAGOUH**

4. The above partnership elects to be a limited liability partnership.

5. This application will be effective on **Wednesday, March 20, 2024**.

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

Name of partner: **ABDELHAFID MAGOUH**

Signature of individual signing on behalf of partner:
ABDELHAFID MAGOUH

Name of partner: **ABDELHAFID MAGOUH**

Signature of individual signing on behalf of partner:
ABDELHAFID MAGOUH

Name of partner: **MOHAMED MAGOUH**

Signature of individual signing on behalf of partner:
MOHAMED MAGOUH

I, **ABDELHAFID MAGOUH**, consent to sign for **ABDELHAFID MAGOUH** who serves as the Registered Agent on behalf of the limited liability partnership.

on Wednesday, March 20, 2024

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