

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
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Secretary of State  
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**Certificate of Limited Partnership**  
**Domestic Business Entity**

**KNP**

Pursuant to the provisions of KRS Chapter 362.2, the undersigned applicant applies to register a certificate of limited partnership and for that purpose submits the following statement:

A Kentucky limited partnership is formed pursuant to the Kentucky Uniform Limited Partnership Act (2006).

**Article I:** The name of the limited partnership is

**STINGAR ARMS LIMITED PARTNERSHIP**

**Article II:** The mailing address of the designated office of the limited partnership is

**396 fair view church rd, Smiths Grove, KY 42171**

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

**396 fair view church rd, Smiths Grove, KY 42171**

and the name of the initial registered agent at that office is **Benjamin Matthew Delk**

**Article IV:** The name and mailing address of each general partner is

Lucas Dillon Delk 2881 L&N Turnpike, Horse Cave, KY 42749

Benjamin Matthew Delk 396 fair view church rd, Smiths Grove, KY 42171

Delk

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

Signature of partner: **Lucas Dillon Delk**

Signature of partner: **Benjamin Matthew Delk**

I, **Benjamin Matthew Delk**, consent to serve as the Registered Agent on behalf of the corporation.

**Benjamin Matthew Delk**

12/13/2022