# APPLICATION FOR REGISTRATION

Corporation Division
sos.oregon.gov/business

**E-FILED**
Oct 15, 2025
**OREGON SECRETARY OF STATE**

**REGISTRY NUMBER**

247915390

**TYPE**

ASSUMED BUSINESS NAME

**ENTITY NAME**

GOLIATH DEFENSE

**BUSINESS ACTIVITY**

FIREARMS SALES, FIREARMS MANUFACTURING, HOLSTER MANUFACTURING, TACTICAL SUPPLY.

**PRINCIPAL PLACE OF BUSINESS**

2813 PACIFIC BLVD SW
ALBANY OR 97321 USA

**NAME & ADDRESS OF AUTHORIZED REPRESENTATIVE**

228738696 - GOLIATH DEFENSE LLC

4583 SAGECREST DR NE
ALBANY OR 97322 USA

**REGISTRANT/OWNER**

228738696 - GOLIATH DEFENSE LLC

4583 SAGECREST DR NE
ALBANY OR 97322 USA

**COUNTIES**

LINN

I declare as an authorized signer, that this filing has been examined by me and is, to the best of my knowledge and belief, true,correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

**ELECTRONIC SIGNATURE**

**NAME**

COLIN MEYER

**TITLE**

REGISTRANT

**DATE**

10-14-2025