

**2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L13000143242

**Entity Name:** APOCALYPSE AMMO & GUNSMITHING LLC.

**Current Principal Place of Business:**

3469 PRECISION DR.  
SUITE 104  
NOKOMIS, FL 34275

**Current Mailing Address:**

2519 MONTEREY ST  
SARASOTA, FL 34231 US

**FEI Number:** 46-4732649

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WESTMORELAND, DIANA LYNN  
2519 MONTEREY STREET  
SARASOTA, FL 34231 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** DIANA LYNN WESTMORELAND

01/27/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	PRESIDENT	Title	CEO
Name	WESTMORELAND, PAUL	Name	WESTMORELAND, DIANA
Address	2519 MONTEREY STREET	Address	2519 MONTEREY ST.
City-State-Zip:	SARASOTA FL 34231	City-State-Zip:	SARASOTA FL 34231

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAUL WESTMORELAND

PRESIDENT

01/27/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date