

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000039329

**Entity Name:** MARSHALL'S FIREARM SERVICE AND REPAIR, L.L.C.

**Current Principal Place of Business:**

555 MARLBOROUGH ST  
#8  
OLDSMAR, FL 34766

**Current Mailing Address:**

14121 ARBOR HILLS RD.  
TAMPA, FL 33625 US

**FEI Number:** 46-5087237

**Certificate of Status Desired:** No

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

MARSHALL, MARCUS B  
14121 ARBOR HILLS RD.  
TAMPA, FL 33625 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title	MANAGER	Title	MANAGER
Name	MARSHALL, LINDSEY J	Name	MARSHALL, MARCUS B
Address	14121 ARBOR HILLS RD.	Address	14121 ARBOR HILLS RD.
City-State-Zip:	TAMPA FL 33625	City-State-Zip:	TAMPA FL 33625
Title	AUTHORIZED REPRESENTATIVE		
Name	BRATTON, MATTHEW		
Address	710 HARBOR WAY		
City-State-Zip:	PALM HARBOR FL 34682		

*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:** MARCUS MARSHALL

**OWNER/MANAGER**

**04/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date