2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2017
Secretary of State
CC1834210396

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Entity Name: K & L ARMS L.L.C.

Current Principal Place of Business:

4840 S PENINSULA DR
PONCE INLET, FL 32127

Current Mailing Address:

4840 S PENINSULA DR
PONCE INLET, FL 32127 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHARPLES, D. KENT
4840 S PENINSULA DR
PONCE INLET, FL 32127 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	MGR	Title	MGR
Name	SHARPLES, D. KENT	Name	SHARPLES, LINDA
Address	4840 S PENINSULA DR	Address	4840 S PENINSULA DR
City-State-Zip:	PONCE INLET FL 32127	City-State-Zip:	PONCE INLET FL 32127

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: D. KENT SHARPLES MGR 04/26/2017

Electronic Signature of Signing Authorized Person(s) Detail — Date