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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP
Account Number : 075500004387
Phone : (813) 229-7600
Fax Number : (813) 229-1660

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA LIMITED LIABILITY CO. Adams Arms, LLC

Certificate of Status	0
Certified Copy	1
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Help

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Adams Arms, Inc.
612 Florida Avenue
Palm Harbor, Florida 34683

May 25, 2012

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Consent to use name

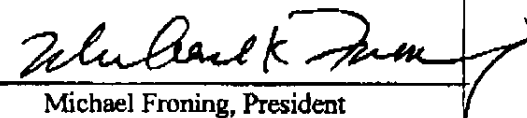
Dear Sir/Madam:

Adams Arms, Inc. (the "Company"), organized under the laws of Florida, has released and will not revoke the rights to its name to Adams Arms, LLC, which is to be a wholly-owned subsidiary of the Company

Very truly yours,

Adams Arms, Inc.

By:


Michael Froning, President

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Articles of Organization

of

Adams Arms, LLC

ARTICLE I – Name:

The name of the limited liability company is Adams Arms, LLC.

ARTICLE II – Address:

The street and mailing address of the principal office of the limited liability company is:

612 Florida Avenue
Palm Harbor, Florida 34683

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 25th day of May 2012.



Signature of an authorized representative of a member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Darrell C. Smith, Esq.

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is **Adams Arms, LLC**.
2. The name and the Florida street address of the registered agent are:

Darrell C. Smith, Esq.
c/o Shumaker, Loop & Kendrick, LLP
101 East Kennedy Boulevard
Suite 2800
Tampa, Florida 33602

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Darrell C. Smith, Esq.
Registered Agent

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