

L24000018238

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

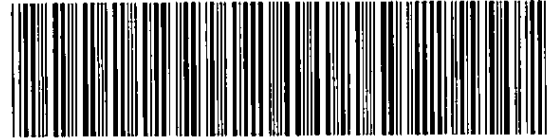
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000418436650

01/11/24--01001--017 **125.00

RECEIVED
2024 JAN 11 AM 10:47
SECURITY
MAIL ROOM
FBI LABORATORY

2024

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: BROOK 1/11

CERTIFIED COPY

XX PHOTOCOPY

GS

XX FILING

LLC

1. **DOUBLE ACTION ARMS, LLC**

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

ARTICLES OF ORGANIZATION

FOR

DOUBLE ACTION ARMS, LLC

The undersigned Organizer, desiring to form a limited liability company pursuant to the provisions of the Florida Revised Limited Liability Company Act (the "Act"), hereby submits, and files with the Florida Department of State, the following Articles of Organization.

ARTICLE I — Name:

The name of the Limited Liability Company shall be: **DOUBLE ACTION ARMS, LLC** (the "Company").

ARTICLE II — Address:

The mailing address and street address of the principal office of the Company shall be as follows:

PO Box 4238
Plant City, FL 33563

With a physical address of:

4950 US HWY 92 W
Plant City, FL 33563

ARTICLE III — Registered Agent and Registered Office:

The address of the initial registered office of the Company in the State of Florida is 121 North Collins Street, Plant City, Florida 33563, and the name of the registered agent at such address is Daniel M. Coton, Esquire.

ARTICLE IV — Management:

The Company shall be managed by one or more Managers. The name and address of the initial Manager is:

I. William Glisson
4950 US HWY 92 W
Plant City, FL 33563

1600

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 605.0113, Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the company is:

DOUBLE ACTION ARMS, LLC
2. The name and address of the registered agent and office is:

Daniel M. Coton, Esquire
121 North Collins Street
Plant City, Florida 33563



I. William Glisson

1/10/2024

Date

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.


DANIEL M. COTON, Esquire

1/10/24

Date

IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization this 10 day of January, 2024. In accordance with Section 605.0201 of the Act, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.



I. William Glisson

2024