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Florida Department of State
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****
bobby@narohmfg.com

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FLORIDA PROFIT/NON PROFIT CORPORATION
NAROH ARMS, INC.

Certificate of Status	1
Certified Copy	0
Page Count	04
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FLORIDA DEPARTMENT OF STATE
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H18000210428 3

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

NAROH ARMS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**185 GUS HIPP BLVD.
ROCKLEDGE, FL 32955**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

200 Shares at no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**ROBERT HORAN
185 GUS HIPP BLVD.
ROCKLEDGE, FLORIDA 32955**

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Prepared By:

**Bruce B. Hubbard
238 WEST JERICHO TURNPIKE
HUNTINGTON STATION, NY 11746**

H18000210428 3

H18000210428 3

ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

ROBERT HORAN-(DIRECTOR/PRESIDENT/SECRETARY/TREASURER)
185 GUS HIPPI BLVD.
ROCKLEDGE, FLORIDA 32955

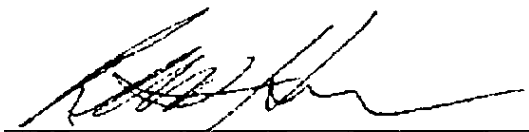
ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ROBERT HORAN
185 GUS HIPPI BLVD., ROCKLEDGE, FLORIDA 32955

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20TH day of JULY 2018



ROBERT HORAN
Signature

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

H18000210428 3

H18000210428 3

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNA TING THE
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **NAROH ARMS, INC.**

2. The name and address of the registered agent and office is:

ROBERT HORAN

Name

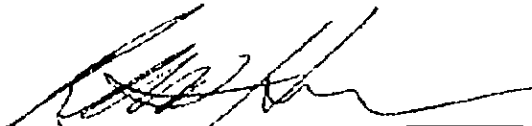
185 GUS HIPP BLVD.

(P.O. Box or Mail Drop Box NOT Acceptable)

ROCKLEDGE, FLORIDA 32955

(City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated corporation 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.



ROBERT HORAN
SIGNATURE

7/20/2018

(Date)

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