

In accordance with the provisions of Title I, Gun Control Act of 1968, and the regulations issued thereunder (27 CFR Part 478), you are licensed to engage in the business specified in this license, within the limitations of Chapter 44, Title 18, United States Code, and the regulations issued thereunder, until the expiration date shown. **THIS LICENSE IS NOT TRANSFERABLE UNDER 27 CFR 478.51.** See "WARNINGS" and "NOTICES" on reverse.

Direct ATF Correspondence To	ATF - Chief, FFLC 244 Needy Road Martinsburg, WV 25405-9431	License Number	<b>4-35-141-01-2H-05463</b>
Chief, Federal Firearms Licensing Center (FFLC)		Expiration Date	<b>August 1, 2022</b>
Name <i>Tracy Robertson</i> TOP SHOT ARMORY LLC			

Premises Address (Changes? Notify the FFLC at least 30 days before the move.)

**22988 IRELAND RD  
SOUTH BEND, IN 46614-**

Type of License

**01-DEALER IN FIREARMS OTHER THAN DESTRUCTIVE DEVICES**

Purchasing Certification Statement

The licensee named above shall use a copy of this license to assist a transferor of firearms to verify the identity and the licensed status of the licensee as provided by 27 CFR Part 478. The signature on each copy must be an original signature. A faxed, scanned or e-mailed copy of the license with a signature intended to be an original signature is acceptable. The signature must be that of the Federal Firearms Licensee (FFL) or a responsible person of the FFL. I certify that this is a true copy of a license issued to the licensee named above to engage in the business specified above under "Type of License."

*Ronald Lee O'Dell*  
Licensee/Responsible Person Signature  
**Ronald Lee O'Dell**

**President**  
Position/Title  
**07-16-2019**

Mailing Address (Changes? Notify the FFLC of any changes.)

TOP SHOT ARMORY LLC  
22988 IRELAND RD  
SOUTH BEND, IN 46614-

**Transfer  
Only**

Form ST-105  
State Form 49065  
(RS / 6-17)

Indiana Department of Revenue  
General Sales Tax Exemption Certificate

Indiana registered retail merchants and businesses located outside Indiana may use this certificate. The claimed exemption must be allowed by Indiana code. Exemption statuses of other states are not valid for purchases from Indiana vendors. **This exemption certificate can not be issued for the purchase of Utilities, Vehicles, Watercraft, or Aircraft.** Purchaser must be registered with the Department of Revenue or the appropriate taxing authority of the purchaser's state of residence.



**Sales tax must be charged unless all information in each section is fully completed by the purchaser.** Purchasers not able to provide all required information must pay the tax and may file a claim for refund (Form GA-110L) directly with the Department of Revenue. A valid certificate also serves as an exemption certificate for (1) county inkeeper's tax and (2) local food and beverage tax.

Section 1 (print only)	Name of Purchaser: <u>Top Shot Armory LLC</u>
	Business Address: <u>22988 Ireland Rd.</u> City: <u>South Bend</u> State: <u>IN</u> ZIP Code: <u>46614</u>
Section 2	Purchaser must provide minimum of one ID number below.*
	Provide your Indiana Registered Retail Merchant's Certificate TID and LOC Number as shown on your Certificate.
	TID Number (10 digits): <u>0139165118</u> - LOC Number (3 digits): <u>001</u>
	If not registered with the Indiana DOR, provide your State Tax ID Number from another State *See instructions on the reverse side if you do not have either number.
Section 3	State ID Number: _____ State of Issue: _____
	Is this a <input checked="" type="checkbox"/> blanket purchase exemption request or a <input type="checkbox"/> single purchase exemption request? (check one)
	Description of items to be purchased: _____
	Purchaser must indicate the type of exemption being claimed for this purchase. (check one or explain)
	<input checked="" type="checkbox"/> Sales to a retailer, wholesaler, or manufacturer for resale only.
	<input type="checkbox"/> Sale of manufacturing machinery, tools, and equipment to be used directly in direct production.
Section 4	<input type="checkbox"/> Sales to nonprofit organizations claiming exemption pursuant to Sales Tax Information Bulletin #10. (May not be used for personal hotel rooms and meals.)
	<input type="checkbox"/> Sales of tangible personal property predominately used (greater than 50 percent) in providing public transportation - provide USDOT Number. A person or corporation who is hauling under someone else's motor carrier authority, or has a contract as a school bus operator, must provide their SSN or FID Number in lieu of a State ID Number in Section 1.
	USDOT Number: _____
	<input type="checkbox"/> Sales to persons, occupationally engaged as farmers, to be used directly in production of agricultural products for sale. Note: A farmer not possessing a State Business License Number may enter a FID Number or a SSN in lieu of a State ID Number in Section 1.
	<input type="checkbox"/> Sales to a contractor for exempt projects (such as public schools, government, or nonprofits).
	<input type="checkbox"/> Sales to Indiana Governmental Units (agencies, cities, towns, municipalities, public schools, and state universities).
Section 5	<input type="checkbox"/> Sales to the United States Federal Government - show agency name. Note: A U.S. Government agency should enter its Federal Identification Number (FID) in Section 1 in lieu of a State ID Number.
	<input type="checkbox"/> Other - explain. _____
Section 6	I hereby certify under the penalties of perjury that the property purchased by the use of this exemption certificate is to be used for an exempt purpose pursuant to the State Gross Retail Sales Tax Act, Indiana Code 6-2.5, and the item purchased is not a utility, vehicle, watercraft, or aircraft.
	I confirm my understanding that misuse, (either negligent or intentional), and/or fraudulent use of this certificate may subject both me personally and/or the business entity I represent to the imposition of tax, interest, and civil and/or criminal penalties.
Section 7	Signature of Purchaser: <i>Annette M. Wise</i> Date: <b>7-17-2019</b>
	Printed Name: <u>Annette M. Wise</u> Title: <u>Business Manager</u>

The Indiana Department of Revenue may request verification of registration in another state if you are an out-of-state purchaser. Seller must keep this certificate on file to support exempt sales.

DESTRUCTIVE DEVICES

ATF Form 8 (5310.11)  
Revised October 2011

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sure t ns ar	22988 Ireland Road, South Bend, IN 46614 P: 574-288-4867 (GUNS) F: 574-472-0586 E: rodell@topshotarmory.com www.topshotarmory.com
business for endorsement of such succession to the Chief FFLC within 30	<b>Annette Wise Business Manager</b>
formation to licensees on a periodic basis.	
	22988 Ireland Road, South Bend, IN 46614 P: 574-288-4867 (GUNS) F: 574-472-0586 E: awise@topshotarmory.com www.topshotarmory.com