

Name and Principal Business Address  ALLEN ARMS INC ALLEN ARMS 1208 POINSETT HWY GREENVILLE, SC 29609-		Tax Statement (Annual Tax Rate) 1000.00 Initial Tax \$ 1000.00 Additions \$ 0.00 Total Tax PAID \$ 1000.00	<b>TAX 2024 YEAR</b>
Actual Physical Business Address (See Number 2 below) ALLEN ARMS INC ALLEN ARMS 1208 POINSETT HWY GREENVILLE, SC 29609		Type of Operation Conducted (62) NFA FIREARMS MFGR  Number of Locations  1 OF 1	
This is a receipt of payment of Special (Occupational) Tax (SOT) under the National Firearms Act. (27 CFR 479.36)			
If You Have Any Questions, Refer To The Information Below			
Date of This Receipt <b>MAY 01, 2023</b>	Dates of Special Tax Period <b>07/01/2023 TO 06/30/2024</b>		
Employer Identification Number <b>26-1761802</b>	Control Number <b>2023108-N70-550</b>		

If you have any questions, you may contact the Bureau of Alcohol, Tobacco, Firearms and Explosives as follows:

### Federal Firearms License (18 U.S.C. Chapter 44)



U.S. Department of Justice  
Bureau of Alcohol, Tobacco, Firearms and Explosives

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 FFLC@atf.gov 1-866-662-2750	License Number <b>1-57-045-07-6D-05801</b>
Chief, Federal Firearms Licensing Center (FFLC)	<i>Tracy Robertson</i>	Expiration Date <b>April 1, 2026</b>
Name	ALLEN ARMS	

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

**1208 POINSETT HWY  
GREENVILLE, SC 29609-**

Type of License

**07-MANUFACTURER OF FIREARMS OTHER THAN DESTRUCTIVE DEVICES**

Purchasing Certification Statement

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

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."

ALLEN ARMS INC  
ALLEN ARMS  
1208 POINSETT HWY  
GREENVILLE, SC 29609-

*C. Allen*  
Licensee/Responsible Person Signature

**PRESIDENT**  
Position/Title

**CURTIS ALLEN**  
Printed Name

**04/04/23**  
Date