

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 478.41. See "WARNINGS" and "NOTICES" on reverse.**

Direct ATF Correspondence To ATF - Chief, FFLC FFLC@atf.gov 1-866-662-2750	License Number <b>1-56-031-07-6H-17860</b>
Chief, Federal Firearms Licensing Center (FFLC) <i>Tracy Robertson</i>	Expiration Date <b>August 01, 2026</b>

Name  
**WILD ZEBRA**

Premises Address (Changes? Notify the FFLC at least 30 days before the move.)  
**6919 K HIGHWAY 70  
NEWPORT, NC 28570-**

**TRANSFER ONLY  
NO FACE TO FACE**

Type of License  
**07-MANUFACTURER OF 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 typed, 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."

**Mailing Address (Changes? Notify the FFLC of any changes.)**  
  
NCGARCIA CORPORATION  
WILD ZEBRA  
6919 K HIGHWAY 70  
NEWPORT, NC 28570-

*Ronald Childress*  
Licensee/Responsible Person Signature  
**RONALD CHILDRESS**  
Printed Name

*Manager*  
Position/Title  
**3-6-24**  
Date

ATF Form # (5310.11)  
Revised September 2023

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

**2027 Special Occupational Tax Payment Receipt**

Name and Principal Business Address  NCGARCIA CORPORATION 6919 K HIGHWAY 70 NEWPORT, NC 28570	Tax Statement (Annual Tax Rate)	1000.00	<b>TAX 2027 YEAR</b>
	Initial Tax . . . \$	1000.00	
Additions . . . \$	0.00		
Reductions . . . \$	0.00		
Total Tax PAID \$	1000.00		
Actual Physical Business Address (See Number 2 below) WILD ZEBRA 6919 K HIGHWAY 70 NEWPORT, NC 28570	THIS IS NOT A BILL. DO NOT PAY THE AMOUNT NOTED.		
	Type of Operation Conducted (62) NFA FIREARMS MFGR		
	Number of Locations <b>0003</b>		
This is a receipt of payment of Special (Occupational) Tax (SOT) under the National Firearms Act (27 CFR 479.36)		<b>1 OF 1</b>	

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If You Have Any Questions, Refer To The Information Below

Date of This Receipt <b>MAY 29, 2026</b>	Dates of Special Tax Period <b>07/01/2026 TO 06/30/2027</b>
Employer Identification Number <b>93-1823879</b>	Control Number

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

CALL: (304) 616-4500 OR WRITE: National Firearms Act Division, Bureau of ATF