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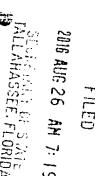
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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJEC	ET: Erik Todd Hansen, LLC Name of Limited Liability Company				
SC DU L	Name of Limited Liability Company				
The encl	osed Articles of Organization and fee(s) are submitted for filing.				
Please re	turn all correspondence concerning this matter to the following:				
	Erik Hansen				
	Name of Person				
	Valley 1. Tilliams Colo Coast Party				
	Keller Williams Gulf Coast Realty Firm/Company				
	21 S. Tarragona St. #103				
	Address				
	Pensacola, FL 32502 City/State and Zip Code				
	City/State and Zip Code				
	E-mail address: (to be used for future annual report notification)				
For furthe	r information concerning this matter, please call:				
	Erik Hansen at (850) 377-2201				
	Name of Person Area Code Daytime Telephone Number				
_	is a check for the following amount:				
\$125.00	Filing Fee \$\int_{\text{S130.00 Filing Fee}} \text{S130.00 Filing Fee} & \int_{\text{Certified Copy}} \text{S160.00 Filing Fee}, \\ \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Certified Copy} \text{(additional copy is enclosed)}				
	Mailing Address New Filing Section Street Address New Filing Section				
	Division of Corporations Division of Corporations				
P.O. Box 6327 Cliffon Building Tallahassee, FL 32314 2661 Executive Center Circle					

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	FILED 2016 AUG O.				
Erik Todd Hanson, LLC (Must end with the words "Limited Liability Company, "L.	2016 AUG 26 AM 7: 19 SELLAHASSEE FLORIDA				
ARTICLE II - Address:	THASSEE. FLORIDA				
The mailing address and street address of the principal office of the Limited Liab	pility Company is:				
Principal Office Address:	Mailing Address:				
21 S. Tarragona St. #103 21 S Pensacola, Pl 32502 Pens	S. Tarragona St. #103 acola, PL 37502				
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's (The Limited Liability Company cannot serve as its own Registered Agent. You another business entity with an active Florida registration.)					
The name and the Florida street address of the registered agent are:					
Frik Todd Hanse	^e n				
Name					
21 S. Tarragona S	t. #103				
Frik Todd Hansen Name 21 S. Tarragona St. #103 Florida street address (P.O. Box NOT acceptable)					
Pensacola FL City State	32502				
City State	Zip				
Having been named as registered agent and to accept service of process for the about a clace designated in this certificate, I hereby accept the appointment as registered agout the agree to comply with the provisions of all statutes relating to the proper and am familiar with and accept the obligations of my position as registered agent as proper and the control of the control of the proper and the control of the control o	gent and agree to act in this capacity. I I complete performance of my duties, and I				
Registered Agent's Signature	(REQUIRED)				

(CONTINUED)

Page 1 of 2

Title: "AMBR" = At "MGR" = Mat	2	Name and Address: Erik Hansen 9909 Stane	2016 AUG 26 AM 7: 19 SELD TALLAHASSELE, FLORIDA
_mgr	<u>-</u>	Angela Hans 9909 Stone Punsacola, FL	32514 meadow 120. 32514
ARTICLE V: Effective (If an effective date is lette date of filing.) Note: If the date insert	ted in this block does not mee we date on the Department of	fic and cannot be more than fivet the applicable statutory filing r	(OPTIONAL) e business days prior to or 90 days after requirements, this date will not be listed as
REOUIRED	This document is executed I am aware that any false in constitutes a third degree for	ber or an authorized represent in accordance with section 605. Iformation submitted in a docume elony as provided for in s.817.15	0203 (1) (b), Florida Statutes. ent to the Department of State 5, F.S.
	- Angi	Typed or printed name of signee Filing Fees:	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)