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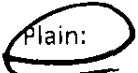
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Name:	1st Place Team Sales, LLC
Document #:	10310587
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Amount: \$ 125.00

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**1<sup>ST</sup> PLACE TEAM SALES, INC.  
3520 AGRICULTURAL CENTER DRIVE  
SUITE 310  
ST. AUGUSTINE, FLORIDA 32092**

December 30, 2016

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

To Whom It May Concern:

1<sup>st</sup> Place Team Sales, Inc., a Florida corporation, hereby authorizes and consents to the use of 1<sup>ST</sup> PLACE TEAM SALES, LLC as the name of a filing entity in Florida for the purpose of submitting Articles of Organization to the Florida Department of State.

As the President of 1<sup>st</sup> Place Team Sales, Inc., I certify that I am authorized to give this consent.

1<sup>st</sup> Place Team Sales, Inc.

By:   
Name: Danielle Olson  
Title: President

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**ARTICLES OF ORGANIZATION  
OF  
1<sup>ST</sup> PLACE TEAM SALES, LLC**

**ARTICLE I – Name.** The name of the Florida Limited Liability Company is **1<sup>ST</sup> PLACE TEAM SALES, LLC**.

**ARTICLE II – Principal Office And Mailing Address.** The mailing address and street address of the principal office of the Limited Liability Company is 3520 Agricultural Center Drive, Suite 310, St. Augustine, Florida 32092.

**ARTICLE III – Registered Office And Agent And Registered Agent's Signature.**  
The name and the Florida street address of the registered agent are Troy Olson, 3520 Agricultural Center Drive, Suite 310, St. Augustine, Florida 32092.

*Having been named as registered agent and to accept service of process for the above stated limited liability company 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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.*

  
Troy Olson

**ARTICLE IV – Manager.** The Limited Liability Company is to be managed by managers and the name and address who are to serve as initial managers are:

Title:

Name and Address:

Manager

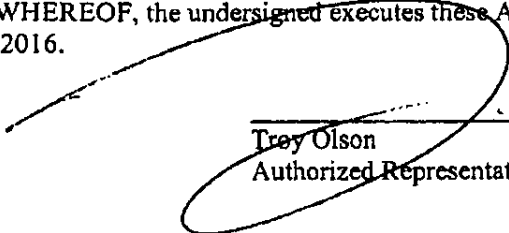
Danielle Olson  
3520 Agricultural Center Drive, Suite 310  
St. Augustine, Florida 32092

Manager

Troy A. Olson  
3520 Agricultural Center Drive, Suite 310  
St. Augustine, Florida 32092

[Signature Page Follows]

IN WITNESS WHEREOF, the undersigned executes these Articles of Organization this  
30<sup>th</sup> day of December, 2016.



Troy Olson  
Authorized Representative

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