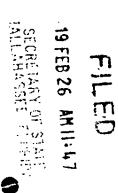
119000050050

(Re	questor's Name)	
(Ád	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	
	/ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

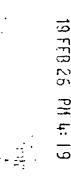
Office Use Only



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TSCHROEDER

	CAPITAL	CONNECTION,	INC
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417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Radio, LLC			
			1
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
ature			Fictitious Owner Search
			Vehicle Search
			Driving Record
ested by: Seth	02/26/19		UCC 1 or 3 File
·	Date	Time	UCC 11 Search
			UCC 11 Retrieval
In	Will Pick Up		Courier

UnRadio, Inc. 1550 Madruga Avenue Suite 120 Coral Gables, FL 33146

February 25, 2019

Florida Secretary of State

Re:

UnRadio, LLC

Gentlemen:

We have been notified that the above name is too similar to the name UnRadio, Inc. which we are having filed with you.

The same principal is the owner of both entities.

We give you permission for the use of the name of UnRadio, LLC, and for you to file the articles of organization for UnRadio, LLC.

Very truly yours,

UnRadio, Ing

Michael Baisden, President

COVER LETTER

	v Filing Section ision of Corporations
SUBJECT:	UnRadio, LLC
	Name of Limited Liability Company
The enclosed	Articles of Organization and fee(s) are submitted for filing.
Please return	all correspondence concerning this matter to the following:
_	Mark L. Rivlin, Esq.
	Name of Person
_	Mark L. Rivlin, P.A. Firm/Company
	rinivconpary
_	1550 Madruga Avenue, Suite 120 Address
	Coral Gables, FL 33146
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
or further info	rmation concerning this matter, please call:
H	lark L. Rivlin Esq. at(305) 661-4600
_	Name of Person Area Code Daytime Telephone Number
Enclosed is a	check for the following amount:
\$125.00 Filing	Stee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address Street Address
	New Filing Section New Filing Section Division of Corporations Division of Corporations
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	UnRadio	, LLC	
(Must co	ntain the words "Limited Liability		LC.")
ARTICLE II - Address: The mailing address and street	address of the principal office of	the Limited Liability Comp	any is:
<u>Princi</u>	pal Office Address:	<u>Mail</u>	ing Address:
	- 4 0.44. 100	1550 Madruga	Avenue, Suite
Coral Gable: RTICLE III - Registered Agent Companion of the Limited Liability Companion of the Dusiness entity with an	gent, Registered Office, & Regis by cannot serve as its own Register active Florida registration.)	tered Agent's Signature: red Agent. You must design	
RTICLE III - Registered Agenthe Limited Liability Companiother business entity with an	gent, Registered Office, & Regis by cannot serve as its own Register active Florida registration.)	tered Agent's Signature: red Agent. You must design	
RTICLE III - Registered Agenthe Limited Liability Companion other business entity with an	gent, Registered Office, & Regis by cannot serve as its own Register active Florida registration.) t address of the registered agent as Mark L. Ri Name	coral Gables tered Agent's Signature: red Agent. You must design re: vlin, P.A.	
RTICLE III - Registered Agenthe Limited Liability Companion other business entity with an	gent, Registered Office, & Regis by cannot serve as its own Register active Florida registration.) t address of the registered agent as	coral Gables tered Agent's Signature: red Agent. You must design re: vlin, P.A. enue, Suite 120	
RTICLE III - Registered Agenthe Limited Liability Companion other business entity with an	gent, Registered Office, & Registered office, & Registered office, & Registery cannot serve as its own Register active Florida registration.) t address of the registered agent are Mark L. Ri Name 1550 Madruga Av	tered Agent's Signature: red Agent. You must design re: vlin, P.A. enue, Suite 120 ox NOT acceptable)	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

FILED

19 FEB 26 AM II: 47

SECRETARY OF STATE
TALL AHASSEE FIREIT

The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-