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(Requ	estor's Name)
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DIVISION OF CORPORATIONS

06 JUL 24 AM 9: 35

B. THOROCK JUL 28 2006

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Word revolution radio, Lom 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:
Hector G, CAPOTE (Name of Person)
(Name of Person)
(Firm/Company)
13876 SW 56ST Suite 428
(Address)
(Address) (Address) (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Hector Apole at 305 299-1067 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 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:			
(Must end with the words "Limited Liability Company, "Limited Company," Limited Company, "Limited Company,"	ompany" or their abbreviation "LLC," or "L.C.,"	")	
ARTICLE II - Address: The mailing address and street address of the princ	ipal office of the Limited Liability C	Compan	ıy is:
Principal Office Address:	<u> Mailing Address:</u>		
13876 SW 52 ST SVILE 428 Minni, 12 33/75	13876 SW 565 Suite 415 Himi, FC 33/19	† 	
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	ffice, & Registered Agent's Signaturi Agent. You must designate an individual or and	ure: other	, <u>,,,</u>
The name and the Florida street address of the regis	stered agent are:	90	SIAIO
	s (P.O. Box <u>NOT</u> acceptable)	06 JUL 24 AM 9: 35	ECRETARY OF STATES
City, State, and 2	L 331 + B Zip'	35	SKOIS
Having been named as registered agent and to accelliability company at the place designated in this registered agent and agree to act in this capacity. I statutes relating to the proper and complete perfor accept the obligations of my position as registered. Registered Agent's Signature (certificate, I hereby accept the appoin further agree to comply with the prov rmance of my duties, and I am familia ed agent as provided for in Chapter 6	itment d visions o r with d	as of all and

(CONTINUED) Page 1 of 2

 $\tilde{\mathcal{V}}$

<u>Title:</u> "MGR" = Manage	Name and Address:
"MGRM" = Mana	
_	Λ
IVIGALIV	13876 SW 5674 ST
MGRM	SUITE 428 MIAMI, FL 33
MGY	Hoctor 6: CADITE
	13876 SW 52 m 51
•	Buite 418 Mini, FL 3
MEKN	Fredrick Velez
	13876 SW 5655
	Siste 428 Miami, Fl 33175
	•
(Use attachment if	if necessary)
	if necessary) late, if other than the date of filing: (OPTIONAL)
CLE V: Effective date is liste	date, if other than the date of filing: (OPTIONAL) ted, the date must be specific and cannot be more than five business days p
CLE V: Effective da	date, if other than the date of filing: (OPTIONAL) ted, the date must be specific and cannot be more than five business days p
CLE V: Effective da effective date is liste 0 days after the dat	date, if other than the date of filing: (OPTIONAL) ted, the date must be specific and cannot be more than five business days pate of filing.)
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CLE V: Effective date is liste 0 days after the date REOUIRED SIG	date, if other than the date of filing: (OPTIONAL) ted, the date must be specific and cannot be more than five business days pate of filing.) GNATURE:
CLE V: Effective date is liste 0 days after the date REQUIRED SIG	date, if other than the date of filing: (OPTIONAL) ted, the date must be specific and cannot be more than five business days interested of filing.) GNATURE: Signature of a member or an authorized representative of a member.
CLE V: Effective da effective date is liste 0 days after the dat <u>REQUIRED</u> SIG	date, if other than the date of filing: (OPTIONAL) ted, the date must be specific and cannot be more than five business days parte of filing.) GNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury
CLE V: Effective da effective date is liste 0 days after the dat <u>REQUIRED</u> SIG	date, if other than the date of filing: (OPTIONAL) ted, the date must be specific and cannot be more than five business days interested of filing.) GNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution

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

ARTICLE IV- Manager(s) or Managing Member(s):