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ZUIB AUG 14 AM IUF ZY SECRETARY OF STATE ALLAHASSEE, FLORIDA (850) 245-6051.

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Radio-Active Records, 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:
Michael Ramirez
Radio-Active Records
830 NE 16TH Terrace
Fort Lauderdale, FL 33304
Fort Lauderdale, FL 33304 City/State and Zip Code Milce @ Cadio-active-records. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Ranirez at (954) 618-8283 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certified Copy

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

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Raclio - Active Record (Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
830 NE 16TH Terrace Fort Lauderdale, FL 73304	830 NE 16TH Terrace Fort Lauderstoly, FL 33304
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	
The name and the Florida street address of the reg	istered agent are:
Michael Ramin	
Florida street address Florida street address City, State	Terrace ss (P.O. Box NOT acceptable) FL 33364 , and Zip
liability company at the place designated in thi registered agent and agree to act in this capacity all statutes relating to the proper and complete p	cept service of process for the above stated limited is certificate, I hereby accept the appointment as it. I further agree to comply with the provisions of performance of my duties, and I am familiar with stered agent as provided for in Chapter 608, F.S

Page 1 of 2

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

	<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
	MGRM	Michael Ramirez 830 NE 16TH Terrau Fort Landerdale, FL 73304	- -		
			- - -		
			-		
A DTI	(Use attachment if necessary)	data of Gliman (OPTIO	- -		
(If an		date of filing: (OPTIC be specific and cannot be more than five bus		ays	
	REQUIRED SIGNATURE:		SECRETARY (2013 AUG 14	FILE
	(In accordance with section 608, constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true ation submitted in a document to the Department of State as provided for in s.817.155, F.S.) Quantity Deed or printed name of signce	OF STATE	AM 10: 29	O

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)