Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000135058 3)))



H190001350583ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:	•		دد
	Division of Corporations	문화	APK
	Fax Number : (850)617-6381		7
	• •	SS	$\sim$
From:		77	•
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.	<sup>mi</sup> ⊊i	Ş=.
	Account Number : I20000000019	· ·	æ
	Phone : (305)552-5973	80 i 21 S	Ġ
	Fax Number : (305)675-5944		Ċī
	(303)270	<i>⊃</i> ~	0.75

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Enail	Address:		
-------	----------	--	--

2019 APR 24 PH 4: 45 1

## FLORIDA LIMITED LIABILITY CO. WOW MUSIC GROUP LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

APR 2 5 2019

C Kins

Electronic Filing Menu

Corporate Filing Menu

Help

## 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 LLC." or "LLC.")	); 2)	APR 24	-
٠, ٢٠		ည်း ငှာ သ	

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

19900 € COUNTRY CLUB DI. DPTO 1017 DUENTURA

ARTICLE III - Registered Agent, Registered Office;

The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

DANIEL ROSALES COHEN 19900 E COUNTRY CLUB Dr. Apt 1011 AVENTURA FI 33180

ARTICLE IV-

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

DANIEL ROSALES COHEN, ALEJANDRO GÓMEZ, HERNAN GOMEZ

Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Samos nacros / Samos accordant / Sanosa varmad

Typed or printed name of signee

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..

Registered Agent's Signature (REQUIRED)

DOWEL ROSOLES COHEN

Page 2 of 2