ARIZONA CORP. COMMISSION FILED

OCT 1 2 2016

AZ. CORPORATION COMMISSION FILED OCT 06 2016

FILE NO. L-2128769-5

FILE NO. L. 21287695

ARTICLES OF ORGANIZATION

- 1. ENTITY TYPE: Limited Liability Company
- 2. ENTITY NAME: The name of the Limited Liability Company is:

WEPA! Latin Entertainment, LLC

3. STATUTORY AGENT for service of process. The name and address of the statutory agent of the company is:

Raimundo Rodriguez, Jr 1900 W. Carla Vista Dr. #7003 Chandler, AZ 85246

- 4. ARIZONA KNOWN PLACE OF BUSINESS ADDRESS: The Arizona known place of business address is the same as the street address of the statutory agent.
- 5. MEMBER-MANAGED LLC:

Management of the limited liability company will be reserved to the Members.

6. ORGANIZERS and SIGNATURE: The individual or pre-existing entity submitting this document is the Organizer.

The person signing below declares and certifies under penalty of perjury that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.

Organizer: Raimundo Rodriguez, Jr

Signature

Date

				<u> </u>				
	DO NOT WRITE ABOVE	THIS LINE	; RESERVED FOR ACC USE ONLY.					
			ENT ACCEPTANCE Instructions M002i					
1.	ENTITY NAME — give the exact name in Statutory Agent (this must match exactly statutory agent, e.g., Articles of Organizat WEPA! Latin Entertainment, LLC	the na	me as listed on the document appo					
2.	STATUTORY AGENT NAME — give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be <i>either</i> an individual or an entity). <i>NOTE</i> - the name must match exactly the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:							
	Raimundo Rodriguez, Jr							
3.	By the signature appearing below, the individual or entity named in number 2 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the appointing entity replaces the statutory							
	agent or the statutory agent resigns, whichever occurs first. The person signing below declares and certifies under penalty of perjury that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.							
Siç	4 A		Raimundo Rodriguez, Jr					
RE	QUIRED – check only one:							
	Individual as statutory agent: I am signing on behalf of myself as the individu (natural person) named as statutory ager		Entity as statutory agent: I behalf of the entity named as s and I am authorized to act for	statutory agent,				
E>	ting Fee: none (regular processing)	Mail Fax:	1300 W. Washington St., Phoenix, Arizo					
Plea	Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain							

to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are public record and are open for public inspection.

If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.





DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

MEMBER STRUCTURE ATTACHMENT

ENTITY NAME – give the exact name of the LLC (foreign LLCs – give name in domicile state or country):									
WEPA! Latin Entertainment, LLC									
 A.C.C. FILE NUMBER (if known): Find the A.C.C. file number on the upper corner of filed documents OR on our website at: http://www.azcc.gov/Divisions/Corporations MEMBERS – give the name and address of all Members. If more space is needed, use another Members - give the name and address of all Members. If more space is needed, use another Members - give the name and address of all Members. If more space is needed, use another Members - give the name and address of all Members. If more space is needed, use another Members - give the name and address of all Members. If more space is needed, use another Members - give the name and address of all Members. If more space is needed, use another Members - give the name and address of all Members. 									
ı. Raimundo Rodriguez, J	r		z. Brenda Rodriguez						
1900 W. Carla Vista Dr	<u>. #7003</u>		Name 1900 W. Carla Vista Dr. #7003						
Address 1		·-	Address 1						
Address 2 (optional) Chandler	AZ	85246	Address 2 (optional) Chandler	AZ	85246				
City UNITED STATES	State or Province	Zip	City UNITED STATES	State or Province	Zip				
3.			4.	<u>.</u> .					
Name			Name						
Address 1		.	Address 1						
Address 2 (optional)	Ī		Address 2 (optional)						
Country	State or Province	Zip	City	State or Province	Žip				
5.			6,		-				
Name	<u></u>		Name						
Address 1			Address 1						
Address 2 (optional)		1	Address 2 (optional)		T				
Country	State or Province	Zip	City	State or Province	Zip				
7.			Country						
Name	<u> </u>		Name	*****					
Address 1			Address 1						
Address 2 (optional)		<u> </u>	Address 2 (optional)		<u> </u>				

City

Country

City

State or Province

Zip

State or Province