



RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV.
 2019 JAN -7 2:41:11:31

Articles of Incorporation
 DOMESTIC Non-Profit Corporation

→ Filing Fee: \$35.00

The undersigned, acting as incorporator(s) of a corporation under RIGL 7-6-34, adopt(s) the following Articles of Incorporation for such corporation.

1. The name of the corporation is: <p style="text-align: center; font-size: 1.2em;">Emisora Radial Somos Más Que Vencedores</p>		
2. The period of its duration is: CHECK ONE BOX ONLY		
<input checked="" type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____		
3. The specific purpose or purposes for which the corporation is organized are: <p style="text-align: center; font-size: 1.2em;">Radio Station Broadcasting</p>		
Check the box to indicate an attachment <input type="checkbox"/>		
4. Provisions, if any, not consistent with the law, which the incorporators elect to set forth in these Articles of Incorporation for the regulation of the internal affairs of the corporation are:		
Check the box to indicate an attachment <input type="checkbox"/>		
5. Name and address of the initial registered agent/office in Rhode Island is:		
Agent Name <p style="font-size: 1.2em;">Karin Diaz</p>		
Street Address (NOT a P.O. Box) <p style="font-size: 1.2em;">75 Trask St</p>		
City <p style="font-size: 1.2em;">Providence RI</p>	State <p style="font-size: 1.2em;">RHODE ISLAND</p>	Zip Code <p style="font-size: 1.2em;">02905</p>

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

11:31

**FILED
 STAMP**
 JAN 07 2019
 BY JP XTØXM

6. The number of the initial Board of Directors of the Corporation is 3 (not less than 3 directors) and the names and address of the persons who are to serve as the initial directors are:

NAME	ADDRESS
Karin Ramirez	75 Trask St Prov. RI 02905
Jose Ramirez	75 Trask St Prov. RI 02905
Jose Reynoso Diaz	75 Trask St Prov. RI 02905

Check the box to indicate an attachment

7. The name and address of each incorporator is:

NAME	ADDRESS
Karin Ramirez	Same as above

Check the box to indicate an attachment

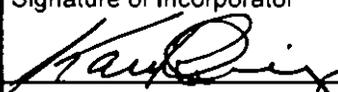
8. Date when these Articles of Incorporation will be effective: **CHECK ONE BOX ONLY**

Date received (Upon filing)

Later effective date (Date must be no more than 30 days from the date of filing) _____

Under penalty of perjury, I/we declare and affirm that I/we have examined these Articles of Incorporation, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Incorporator <u>Karin Ramirez</u>	Date
--	------

Signature of Incorporator 	SIGN DOCUMENT HERE
--	--------------------

Type or Print Name of Incorporator	Date
------------------------------------	------

Signature of Incorporator	SIGN DOCUMENT HERE
---------------------------	--------------------

Type or Print Name of Incorporator	Date
------------------------------------	------

Signature of Incorporator	SIGN DOCUMENT HERE
---------------------------	--------------------