Ü.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved Office of Management and Budget No. 1245-0003 Expires 08-31-2016



This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440. Required of persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended. (LMRDA)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

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C 65 358 1. File Number: Person Filing 2. Name and mailing address (include ZIP Code): 3. Any other address where records necessary to verify this report are kept: Name Name Julio Pablos Title Title Manager Organization Arena Communications Organization P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any Street 279 Shadow Mountain Drive, Ste 205 Street City City El Paso State Texas ZIP Code + 4 79912 State ZIP Code + 4 5. Type of person: 4. Date fiscal year ends: Individual b. Partnership c. Corporation d. Other (Specify): LLP Dec Nature of Agreement or Arrangement Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: 11 / 20 / 2013 Rangel Name Manny 8. Name of person(s) through whom made: Organization Amigos Logistics Name Carlos Ortiz Trade Name, if any **Name** P.O. Box, Bldg., Room No., if any Name Street 5221 S. Millard Avenue City Chicago Name ZIP Code + 4 60632 State Illinois Name Signatures Each of the undersigned declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. See Section VII on penalties in the instructions.) 13. Signed President 14. Signed (If other title, see (If other title, see instructions) instructions) Other (Specify) Title Treasurer Manager On 12/19/2013 (915)342-8167 Date Telephone Number Date Telephone Number

Filer Julio Pablos Arena Communications	File Number C-	
9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:		
a. To persuade employees to exercise or not to exercise, or persuade employees as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing.		
b. To supply an employer with information concerning the activities of employees or a labor organization in connection with a labor dispute involving such employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding.		
10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):		
Paid Hourly. Expenses reimbursed		
Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instructions):		
a. Nature of activity:		
Held meetings with employees to inform them of their section (7) rights and to answer questions pertaining to the union using NLRB documents and union documents for questions and answers.		
11.b. Period during which performed: On-going	11.c. Extent performed: Held meetings in small groups	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Carlos Ortiz	Name William Herrera	
Organization Arena Communications	Organization	
P.O. Box, Bidg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 279 Shadow Mountain Drive, Ste 205	Street 9427 Reston Grove Ln	
City El Paso	City Houston	
State Texas ZIP Code + 4 79912	State Texas ZIP Code + 4 77095	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
Employees in potential bargaining unit	Teamsters Local 710	

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pertaining to the union using NLRB documents and union documents for questions and answers.		
11.b. Period during which performed:	11.c. Extent performed:	
On-going	Held meetings in small groups	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Laura Garcia	Name	
Organization	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bidg., Room No., if any	
Street 2805 Meade Drive	Street	
City Grand Prairie	City	
State Texas ZIP Code + 4 75052	State ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
Employees in potential bargaining unit	Teamsters Local 710	
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