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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160 Phone : (800)494-3124

Fax Number : (561)455~9885

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

Email Address:

FLORIDA LIMITED LIABILITY CO.

JS Capital Venture LLC

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608 and/or 621,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

JS CAPITAL VENTURE LLC

ARTICLE II ADDRESS

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

4549 BALLARD ROAD FORT MYERS, FLORIDA 33905

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are:

SEK WAH LEE 4549 BALLARD ROAD FORT MYERS, FLORIDA 33905

Having been named as registered agent 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 608, F.S.

SEK WAH LEE / Registered Agent's signature

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JS CAPITAL VENTURE LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
ALPHA WEALTH HOLDINGS LLC
4549 BALLARD ROAD
FORT MYERS, FLORIDA 33905

MANAGING MEMBER HUAT AH LLC 4549 BALLARD ROAD FORT MYERS, FLORIDA 33905

MANAGING MEMBER

JJ WEALTH LLC

4549 BALLARD ROAD

FORT MYERS, FLORIDA 33905

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Signature of a member or an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

PRINTED NAME OF SIGNEE

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