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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

200004648582-5 -10/22/01-01074-016

WEALTH POSSIPILITIES GROUP, LLC.

Enclosed are an original and one (1) copy of the artic	cles of incorporation and	i a check for:			
Filing Fee & Designation of Registered Agent = \$125.00	□ \$ Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status	001	<u> </u>	 : : -
FROM: BASIL L. DALLAS, Sr.		SSEE,	22 PH	LED	
<u> 1474 NW 192nd Terrace</u>	Printed or typed)	F STATE FLORIDA	5: 00		
Miami, Florida 33169 City,	State & Zip				_
205 655 0042				-	

Daytime Telephone number

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Authorities of Ottos I in 2017 of the Control of th
ARTICLE I - Name: The name of the Limited Liability Company is: WEALTH POSSIBILITIES GROUP, LLC.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 1475 NW 192nd Terrace, Miami, FL 33169
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
BASIL L. DALLAS, Sr. Name
1475 NW 192nd Terrace, Miami, FL 33169 Florida street address (P.O. Box NOT acceptable)
Miami FL 33169 City, State, and Zip
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 608, F.S. Registered Agent's Signature
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.
(An additional article must be added if an effective date is requested)

MARGARET DACOSTA DALLAS

that the facts stated herein are true.)

Typed or printed name of signee

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

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5.00 Certificate of Status (Optional)