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ACCOUNT NO. : 072100000032

REFERENCE: 172086 7126516

AUTHORIZATION:

COST LIMIT: \$ 125.00 My

ORDER DATE: June 4, 2001

ORDER TIME: 10:32 AM

CORPORATION

ORDER NO. : 172086-005

200004339702--3

CUSTOMER NO: 7126516

CUSTOMER: Christopher N. Davies, Esq

Christopher N. Davies, P.a.

Suite 2

12601 World Plaza Lane Fort Myers, FL 33907

DOMESTIC FILING

NAME:

WELLINGTON SHIELD SERVICES,

LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds - EXT. 1133 EXAMINER'S INITIALS:

NOTAVEDGRED IN NOISIAID

117/5 01 JUN - 4 PM 12: 28

ARTICLES OF ORGANIZATION OF WELLINGTON SHIELD SERVICES, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, hereby makes, acknowledges, and files the following Articles of Organization.

I. Name

The name of the limited liability company is:

Wellington Shield Services, LLC

II. Address

The mailing address and street address of the principal office of the limited liability company is:

2375 Tamiami Trail North Suite 308 Naples Florida 34103-4439

III. Registered Office and Registered Agent

The name and street address of the registered office and agent is:

Christopher N. Davies 2375 Tamiami Trail North Suite 308 Naples Florida 34103-4439

IV. Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

V. Duration

The company shall commence its existence on the date these articles of organization are filed by the Florida Department of State. The company's existence shall be perpetual unless the company is earlier dissolved as provided in these articles of organization or by law.

SECKETARY OF STATE
SECKETARY OF STATE
TALLAMASSEE, FLORIDA

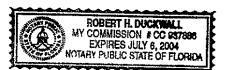
IN WITNESS WHEREOF, the undersigned Christopher N. Davies, as the authorized representative of the members has made and subscribed these Articles of Organization of Wellington Shield Services, LLC, on the 1st day of June, 2001.

Christopher N. Davies

STATE OF FLORIDA COUNTY OF LEE

Sworn to and subscribed before me this 1st day of June, 2001, by Christopher N. Davies who is personally known to me or produced ______as identification.

Notary Public, State of Florida



OI JUN-1 PHI2: 28

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with the laws of Florida, the following is submitted:

First, that Wellington Shield Services, LLC, desiring to organize under the laws of the State of Florida, has named Christopher N. Davies, 2375 Tamiami Trail North, Suite 308, Naples, Florida 34103-4439 as its statutory Registered Agent.

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as Registered Agent.

Christopher N. Davies, Registered Agent

Dated: June 1= 2001

APPROVEL AND FILED 01 JUN -1, PM 12: 28 SECRETARY OF STATE.