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ACCOUNT NO. : 072100000032 REFERENCE: 925789 7358629 Maria Arios AUTHORIZATION : COST LIMIT : \$ 155.00 ORDER DATE: February 11, 2003 ORDER TIME: 10:43 AM ORDER NO. : 925789-005 CUSTOMER NO: 7358629 CUSTOMER: Mr. Jason Smith Tropic Wash, Llc 4300 Nw 27th Street Cape Coral, FL 33993 DOMESTIC FILING SEMINOLE WIND HOLDINGS, LLC NAME: EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ___ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY _ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Norma Parramore - EXT. 1147

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Compatible Northwest 27th Street, Cape Coral, FL 33993 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature.	panyajs:
The mailing address and street address of the principal office of the Limited Liability Comp 4300 Northwest 27th Street, Cape Coral, FL 33993	panysis:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature,	
The name and the Florida street address of the registered agent are:	The state of the s
Jason Smith	1000
Name	Photos
4300 Northwest 27th Street	40,
Florida street address (P.O. Box NOT acceptable)	-
Cape Coral FL 33993	
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.

By:	Jason	Smith	
		Registered Agent's Signature	

(An additional article must be added if an effective date is requested)

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.)

Deborah D. Skipper
Typed or printed name of signee

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)

MANAGING MANAGERS OF: SEMINOLE WIND HOLDINGS, LLC

Jason Smith 4300 Northwest 27th Street Cape Coral, FL 33993

Kevin Campbell 10791 Orange River Blvd. Ft. Myers, FL 33903



LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of SEMINOLE WIND HOLDINGS, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 10 day of feb., 2003

WITNESS:

Signature

Print Name of Witness

 ν .

Signature

Print Name of Witness

Print Name of Signer