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TALLAHASSEE, FLORIDA

JP
6-21-04

LEWIS W. FISHMAN
PROFESSIONAL ASSOCIATION
ATTORNEY AND COUNSELLOR AT LAW
TWO DATRAN CENTER - SUITE 1121
9180 SOUTH DADELAND BOULEVARD
MIAMI, FLORIDA 33156

LEWIS W. FISHMAN
BOARD CERTIFIED IN HEALTH LAW

TELEPHONE (305) 670-2100
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June 16, 2004

Division of Corporations
Florida Department of State
Corporate Filings
P.O. Box 6327
Tallahassee, Florida 32314

Re: Articles of Organization – WMS, LLC

To Whom It Concerns:

Enclosed please find the original Articles of Organization of WMS, LLC, a new limited liability company being organized pursuant to Chapter 608, Florida Statutes, along with my check in the amount of \$155, representing the \$100 filing fee, the \$25.00 registered agent fee and \$30.00 for a certified copy.

If you find the Articles in order, please proceed to file them of record, and return the certified copy to the undersigned at the above address.

We would appreciate the filing of these Articles in as expeditious a manner as possible

Very truly yours,



Lewis W. Fishman

LWF:mmmr
Enclosures

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
WMS, L.L.C.**

ARTICLE I

NAME

The name of this Limited Liability Company, organized in accordance with Chapter 608,
Florida Statutes, is WMS, L.L.C.

ARTICLE II

ADDRESS

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

7330 Ocean Terrace
#2802
Miami Beach, Florida 33141.

ARTICLE III

MANAGEMENT

The Limited Liability Company is to be a Member-Managed Company. The names and
addresses of the initial two (2) Member-Managers are as follows:


David Kuleisus
7330 Ocean Terrace
#2802
Miami Beach, FL 33141


Ameet Vohra
7330 Ocean Terrace
#2304
Miami Beach, FL 33141

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TALLAHASSEE, FLORIDA

REGISTERED AGENT

Lewis W. Fishman, Esquire
Two Datan Center - Suite 1121
9130 South Dadeland Boulevard
Miami, Florida 33156


David Kuleisus


Ameet Vohra

The foregoing instrument was acknowledged before me on the 14 day of June, 2004, by David Kuleisus, who is personally known to me or who produced _____, as identification.

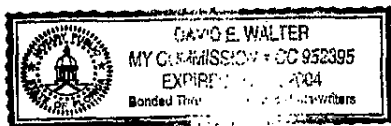
David T. Walter

Notary Public
State of Florida

David E. Walter

Printed Name of Notary Public

My Commission Expires:



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

SS.

The foregoing instrument was acknowledged before me on the 14 day of June, 2004, by Amcet Vohra, who is personally known to me or who produced _____, as identification.

David E. Walter

Notary Public
State of Florida

David E. Walter

Printed Name of Notary Public




My Commission Expires:

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TALLAHASSEE, FLORIDA

ACCEPTANCE OF REGISTERED AGENT

Having been named as Registered Agent to accept service of process for WMS, LLC, 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, Florida Statutes.



Lewis W. Fishman, Esquire

June 16, 2004

(Date)

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