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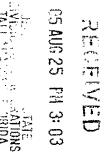
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CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST BARK AVENUE TALLAHASSEE, FL 32301 222-1173

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CONTACT:	<u>KATTE WONSCH</u> 08/25/2005		
DATE:	08/25/2005		
REF.#:	<u>001208.41661</u>		
CORP. NAME:	WIST OF MIAMI, LLC		
() ARTICLES OF INC	ÖRPÖRATION	() ARTICLES OF AMENDMENT	() ARTICLES OF DISSOLUTION
() ANNUAL REPORT		() TRADEMARK/SERVICE MARK	() FICTITIOUS NAME
() FOREIGN QUALIFICATION		() LIMITED PARTNERSHIP	(XX) LIMITED LIABILITY
() REINSTATEMENT		() MERGER	() WITHDRAWAL
() CERTIFICATE OF	CANCELLATION	V	
() OTHER:			
STATE FEES P	REPAID W	ітн снеск# <u>513994</u> fo	PR \$ <u>155.00</u>
AUTHORIZAT	ON FOR A	CCOUNT IF TO BE DEBITE	D:
	COST LIMIT: \$		
PLEASE RETU	RN:		
(XX) CERTIFIED C		() CERTIFICATE OF GOOD STAN	DING () PLAIN STAMPED COPY

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Name:

ARTICLE I - Name:

The name of the Limited Liability Company is:

WISL OF MIAMI, LLC

ARTICLE II - Address:

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

11900 Biscayne Blvd. Suite 620 Miami Florida 33181

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Corp Direct Agents, Inc.

515 East Park Avenue Florida street address (P.O. Box NOT acceptable)

Tallahassee Fl 32301 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.

Article IV - Management (Check box if applicable.)

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

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

REQUIRED SIGNATURE:

signature of a member or an authorized representative of a member.

accordance with section 608.408(3), Florida Statutes, the execution this occument constitutes an affirmation under the penalties of perjury

tever Hell

that the facts stated herein are true.)

Typed or printed name of signee