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DIVISION OF CORPORATIONS

W. KEVIN RUSSELL, P.A.

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

WCAP, LLC.

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**ARTICLES OF ORGANIZATION OF WCAP, LLC.,
A LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I — Name:

The name of the limited liability company (hereinafter referred to as the "Company") is "WCAP, LLC."

ARTICLE II — Address:

The mailing address and street address of the principal office of the Company is: 4875 Hansard Avenue, North Port, Florida 34287.

ARTICLE III — Registered Agent:

The name and the Florida street address of the initial registered agent are: William J. Castagna, 4875 Hansard Avenue, North Port, Florida 34287.

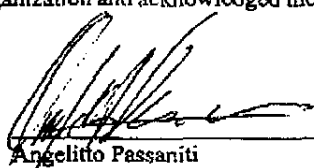
ARTICLE IV — Management:

The Company is to be managed by one manager or more managers and therefore is a manager-managed company. The managers shall be William J. Castagna and his address is 4875 Hansard Avenue, North Port, Florida 34287 and Angelitto Passaniti and his address is 118 West Main Street, Somerset, PA 15501.

ARTICLE V — Limitation on Agency Authority of Members:

Pursuant to Section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 29th day of November, 2005.


Angelitto Passaniti

ANGELITTO PASSANITI
Typed or printed name of signee

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.

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**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT
OF WCAP, LLC.**

I hereby accept the designation as registered agent to accept service of process for the above-stated limited liability company at the place designated in this statement. My street address is 4875 Hansard Avenue, North Port, Florida 34286. 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 under Chapter 608, Florida Statutes.

William J. Castagna
William J. Castagna

WILLIAM J. CASTAGNA
Typed or Printed Name

In accordance with Section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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