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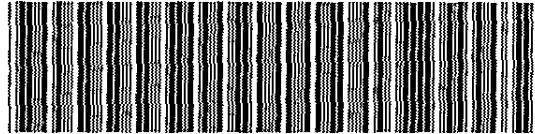
(Business Entity Name)

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SECRETARY OF STATE
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1. WLS Services, LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

ARTICLES OF ORGANIZATION FOR
WLS SERVICES, LLC

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.

ARTICLE I - NAME

The name of this Corporation shall be "WLS SERVICES, LLC"

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 2170 West SR 434, Suite 240, Longwood, Florida 32779.

ARTICLE III - MANAGEMENT

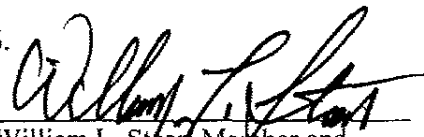
The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. The initial managing member is William L. Stear.

ARTICLE IV

REGISTERED AGENT, REGISTERED OFFICE
AND REGISTERED AGENT'S SIGNATURE

The name and Florida street address of the registered agent is William L. Stear, 2170 West SR 434, Suite 240, Longwood, Florida 32779. 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 an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

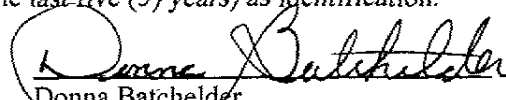
Dated this 14 day of September 2006.


William L. Stear, Member and
Registered Agent

STATE OF FLORIDA
COUNTY OF SEMINOLE

The foregoing Articles of Organization for WLS Services, LLC, a Florida limited liability company, were acknowledged before me this 14 day of September 2006, by WILLIAM L. STEAR. Said person did not take an oath and (check one) ☒ is personally known to me, or ☐ produced a valid driver's license (issued by a state of the United States within the last five (5) years) as identification.




Donna Batchelder
Notary Public - State of Florida
Commission Number: DD 200318
My Commission Expires: 08/04/2007