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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**Aquila Wellington Management Company LLC**

Certificate of Status	1
Certified Copy	1
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**ARTICLES OF ORGANIZATION  
OF  
AQUILA WELLINGTON MANAGEMENT COMPANY LLC  
a Florida limited liability company**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida does set forth the following:

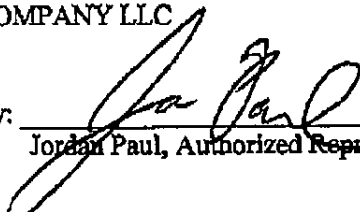
1. **NAME.** The name of the limited liability company is Aquila Wellington Management Company LLC (the "Company").

2. **MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE.** The mailing and street address of the principal office of the Company is: c/o Aquila Property Company, Inc., 15430 Endeavour Drive, Jupiter, Florida 33478.

3. **REGISTERED AGENT.** The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization are: NRAI Services, Inc., 2731 Executive Park Drive, Suite 4, Weston, Florida 33331.

The undersigned has executed these Articles of Organization on the 20<sup>th</sup> day of April, 2007.

AQUILA WELLINGTON MANAGEMENT  
COMPANY LLC

By:   
Jordan Paul, Authorized Representative

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**CERTIFICATION OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Aquila Wellington Management Company LLC.

2. The name and address of the registered agent and office are:

NRAI Services, Inc.

2731 Executive Park Drive, Suite 4

Weston, Florida 33331

*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 its 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.*

  
NRAI Services, Inc. Registered Agent

4-20-07  
(Date)