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(Business Entity Name)		
(Document Number)		
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VISION OF CORPORATIO



ACCOUNT NO. : 072100000032		
REFERENCE: 939688 7569274		
AUTHORIZATION: melbeleman		
COST LIMIT : \$ 130.00		
ORDER DATE : June 8, 2007		
ORDER TIME : 9:41 AM		
ORDER NO. : 939688-005		
CUSTOMER NO: 7569274		
DOMESTIC FILING		
NAME: WEH/CELLCOM LLC		
EFFECTIVE DATE:		
ARTICLES OF INCORPORATION		
CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY XX PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING		
CONTACT PERSON: Debbie Skipper - EXT. 2948		
EXAMINER'S INITIALS.		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: WEH/Cellcom LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C. **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is **Principal Office Address:** Mailing Address: 2900 Linden Lane 379 Regatta Drive Suite 300 Jupiter, FL 33477 Silver Spring, Maryland ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Corporation Service Company Name 1201 Hays Street Florida street address (P.O. Box NOT acceptable) Tallahassee FL 32301

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..

Corporation Service Company

Registered Agent's Signature (REQUIRED)

City, State, and Zip

Deborah D. Skipper Asst. V. Pres.

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
Manager	Warren E. Halle 379 Regatta Drive Jupiter, FL 33477
 	
(Use attachment if necessary)	 -
ARTICLE V: Effective date, if other than the of (If an effective date is listed, the date must be to or 90 days after the date of filing.)	date of filing: (OPTIONAL) specific and cannot be more than five business days prior

REQUIRED SIGNATURE:

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

(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.)

By: Steven S. Snider, authorized representative of warren E. Halle

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- 5 5.00 Certificate of Status (Optional)