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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HAILE, SHAW & PFAFFENBERGER, P.A.
Account Number : 07632603550
Phone : (561) 627-8100
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**FLORIDA LIMITED LIABILITY CO.
WC-50, LLC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
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**ARTICLES OF ORGANIZATION
OF
WC-50, LLC**

The undersigned authorized representative of a member, for the purpose of forming a limited liability company under the Florida Limited Liability Act, Florida Statutes Chapter 605 (the "Act"), hereby makes, acknowledges and files the following Articles of Organization:

ARTICLE I — NAME

The name of the limited liability company is WC-50, LLC (the "Company"),

ARTICLE II - ADDRESS

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

Principal Office Address:

One Financial Plaza
100 SE 3rd Avenue, Suite 102
Ft. Lauderdale, FL 33301

Mailing Address:

One Financial Plaza
100 SE 3rd Avenue, Suite 102
Ft. Lauderdale, FL 33301

ARTICLE III - REGISTERED AGENT

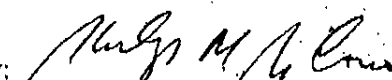
The name and Florida street address of the registered agent are:

Haile, Shaw & Pfaffenberger, P.A.
660 U.S. Highway One - Third Floor
North Palm Beach, FL 33408

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 605, F.S.

Haile Shaw & Pfaffenberger, P.A.

By:


Philip M. DiComa, Esquire

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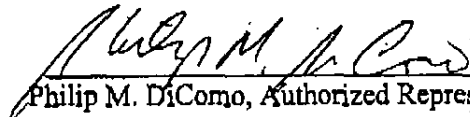
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ARTICLE IV — MANAGEMENT

The name and address of the person authorized to manage the Company:

<u>Title</u>	<u>Name and Address</u>
AMBR	Kenneth M. Simigran One Financial Plaza 100 SE 3 rd Avenue, Suite 102 Ft. Lauderdale, FL 33301

REQUIRED SIGNATURE


Philip M. DiComo, Authorized Representative

(In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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