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ACCOUNT NO. : 072100000032

REFERENCE: 416925 7323954

AUTHORIZATION:

ORDER DATE: February 26, 2002

ORDER TIME : 10:23 AM

ORDER NO. : 416925-005

CUSTOMER NO: 7323954

CUSTOMER: Jerry Vince, Esq

Jerry Vince, Esq.

1505 Dennis Street

Jacksonville, FL 32204

DOMESTIC FILING

NAME:

REVOLUTIONARY COLD TECHNOLOGIES, 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

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds - EXT. 1133

EXAMINER'S INITIALS:

02 MAR -6 PH 12: 16 SECRETARY OF STATE TALL AHASSEE, FLORIDA

700005050447--4

APPROVE

02 MAR -6 AM II: 43

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: REVOLUTIONARY COLD TECHNOLOGIES, LLC ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 1505 DENNIS STREET, JACKSONVILLE, FL 32204 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

	PAUL R	OBBINS		
	Name			 -
	1505 DENN	IS STRE	et .	
	Florida street address (P.O. Box NOT acceptable)			
	JACKSONVILLE	FL	32204	_
	City, State, and Zip			<u> </u>
liability company at the registered agent and ag	egistered agent and to accept place designated in this certif ree to act in this capacity. I fu roper and complete performa	ìcate, I he ırther agr	reby accept the ee to comply wi	appointment as ith the provisions of all

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

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.)

PAUL ROBBINS

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

AMO