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SECRETARY OF STATE OF SECRETARY OF STATE OF CORPORATIONS

COVER LETTER

TO: Registration Sec Division of Cor			
SUBJECT: IAT Ene	ergy Solutions LLC		
		Liability Company)	
The enclosed Articles of	Organization and fee(s) are su	bmitted for filing.	
Please return all correspondent	ondence concerning this matter	r to the following:	06 APR 24 PH 4: 15
David L. Fra	ank		PF OF
	(1	Name of Person)	24
Innovative A	American Technolog	jies Inc.	P .
-	(Firm/Company)	Ŧ,
5255 North	n Federal Highway	Suite 300	क
 		(Address)	
Boca Rato	on, Florida 33487		
<u>Bood Nato</u>		(State and Zip Code)	
For further information	concerning this matter, please	call:	
David L. Frank		at (561 866 7532)	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Cente	ons

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CO **ARTICLE I - Name:** The name of the Limited Liability Company is: IAT Energy Solutions 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:** 5255 North Federal Highway 5255 North Federal Highway Boca Raton, Florida 33487 Boca Raton, Florida 33487 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: David L. Frank Name 5255 North Federal Highway Florida street address (P.O. Box NOT acceptable)

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..

FL 33487

Registered Agent's Signature (REQUIRED)

City, State, and Zip

Boca, Raton,

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Memb	Name and Address:
MGR	Innovative American Technologies Inc.
	5255 North Federal Highway
	Boca Raton, Florida 33487
<u> </u>	
	06 APR 24
	70 H
	24 PM 4: 15
(Use attachment if necessary)	
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.)	han the date of filing: April 21, 2006 (OPTIONAL) must be specific and cannot be more than five business days pric
effective date is listed, the date	han the date of filing: April 21, 2006 (OPTIONAL) must be specific and cannot be more than five business days pric
effective date is listed, the date 0 days after the date of filing.) REQUIRED SIGNATURE:	han the date of filing: April 21, 2006 . (OPTIONAL) must be specific and cannot be more than five business days price member or an authorized representative of a member.
effective date is listed, the date 0 days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this docume	must be specific and cannot be more than five business days price

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)