

# L00000005374

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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## To:

Division of Corporations  
Fax Number : (850) 922-4003

## From:

Account Name : M. BURR KEIM COMPANY  
Account Number : I19990000242  
Phone : (215) 563-8113  
Fax Number : (215) 977-9386

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TALLAHASSEE, FLORIDA

## LIMITED LIABILITY COMPANY

Rocky OIL, LLC

RECEIVED  
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Certificate of Status	1
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: **ROCKY OTL, LLC**

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
919 Main Street, Stroudsburg, PA 18360

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

W. Bradley Munros, Esquire  
Name  
239 East Virginia Street  
Florida street address (P.O. Box **NOT** acceptable)  
Tallahassee FL 32301  
City, State, and Zip

*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..*

*W. B. Munros*  
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)

*Robert Worthington*  
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.)

Typed or printed name of signee  
Robert Worthington, Authorized Representative

#### 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)

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