L1900116939

| (Re | equestor's Name) | |
|-------------------------|----------------------|----------------|
| (Ad | idress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone # | (f) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Name | e) |
| (Dc | ocument Number) | |
| Certified Copies | _ Certificates o | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
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| | | |

Office Use Only



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COVER LETTER

| oue mo | Metallurgical Carbons, LLC | | |
|---------------|---|-------------------|---|
| SUBJEC | T: Name of | Limited Liabili | ty Company |
| The enclo | sed Articles of Organization and fee(s | | |
| Please ret | urn all correspondence concerning thi | s matter to the f | ollowing: |
| | James D. Casale | | |
| | | Name of | Person |
| | Casale & Bonner, P.C. | | |
| | | Firm/Co | npany |
| | 33 West Third Street, Suite 202 | | |
| | | Addro | SS |
| | Williamsport, PA 17701 | | |
| | kathy@cbatty.com | City/State and | Zip Code |
| | E-mail address: (to be u | sed for future ar | inual report notification) |
| For further i | information concerning this matter, pl | ease call: | |
| | Kathy Alexander | 570 | 326-7044 |
| | Name of Person | Area Code | Daytime Telephone Number |
| Enclosed i | s a check for the following amount: | | |
| \$125.00 F | _ | Certific | Filing Fee & S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Address | _ | treet Address |
| | New Filing Section Division of Corporations | | lew Filing Section Division of Corporations |
| | P.O. Box 6327 Tallahassee, FL 32314 | C | Nifton Building 661 Executive Center Circle |

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| | bons, LLC | | | | | |
|--|---|--|---|-------------------------|-------------|---------|
| (Must c | ontain the words "Limited I | Liability Company, | "L.L.C.," or "LLC.") | | | |
| ARTICLE II - Address: The mailing address and street | et address of the principal of | ffice of the Limited | Liability Company is: | | | |
| Princ | cipal Office Address: | | Mailing Address: | | | |
| 1121 San Michele | | 1121 | San Michele Way . | | | |
| | | | | | | |
| Palm Beach Garde ARTICLE III - Registered A (The Limited Liability Compa another business entity with a | Agent, Registered Office, a | Registered Ager | n Beach Gardens, FL 33418 nt's Signature: You must designate an individual | or | | |
| ARTICLE M - Registered A | Agent, Registered Office, & any cannot serve as its own in active Florida registration et address of the registered | & Registered Ager Registered Agent. (1.) agent are: | nt's Signature | SECT | 19 N | |
| ARTICLE III - Registered A (The Limited Liability Compa another business entity with a | Agent, Registered Office, d any cannot serve as its own in active Florida registration | & Registered Agent. The Registered Agent. Th | nt's Signature | SECRE- | 19 APR | <u></u> |
| ARTICLE III - Registered A (The Limited Liability Compa another business entity with a | Agent, Registered Office, & any cannot serve as its own in active Florida registration et address of the registered Matteis & Company, 1 | & Registered Agent. The Registered Agent. Th | nt's Signature | SECTION SECTION OF | 19 APR 29 | FIL |
| ARTICLE III - Registered A (The Limited Liability Compa another business entity with a | Agent, Registered Office, & any cannot serve as its own in active Florida registration et address of the registered Marteis & Company, 1980 North Federal His | & Registered Agent. (Agent.) Agent are: LLC Name | nt's Signature: You must designate an individual | SECIAL SE | 19 NPR 29 # | FILE |
| ARTICLE III - Registered A (The Limited Liability Compa another business entity with a | Agent, Registered Office, & any cannot serve as its own in active Florida registration et address of the registered Matteis & Company, 1 | & Registered Agent. (Agent.) Agent are: LLC Name | nt's Signature: You must designate an individual | SECURE SE TALLANCE SE T | 37 | LI) |
| ARTICLE III - Registered A (The Limited Liability Compa another business entity with a | Agent, Registered Office, & any cannot serve as its own in active Florida registration et address of the registered Marteis & Company, 1980 North Federal His | & Registered Agent. (Agent.) Agent are: LLC Name | nt's Signature: You must designate an individual | SECTION TO | | FILED |

Italiang 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

| | Title: "AMBR" = Authorized Member | Same and Address: |
|----------------------------|--|---|
| | "MGR" = Manager | |
| | AMBR | Susquehanna Minerals, Inc. |
| | | 214 Railroad Street |
| | | Muney, PA 17756 |
| | MGR | David W. Pfleegor |
| | | 1121 San Michele Way |
| | | Palm Beach Gardens, FL 33418 |
| | | |
| | | |
| | • | |
| | | |
| | | |
| | | |
| | (Use attachment if necessary) | |
| in da te: do | CLE V: Effective date, if other than the effective date is listed, the date must be of filing.) | be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be lis |
| n da <u>e:</u> do | CLE V: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block does cument's effective date on the Departs | be specific and cannot be more than five business days prior to or 90 days anot meet the applicable statutory filing requirements, this date will not be lis |
| n da <u>e:</u> do | CLE V: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block does cument's effective date on the Departs | be specific and cannot be more than five business days prior to or 90 days a not meet the applicable statutory filing requirements, this date will not be list ment of State's records. |
| n da <u>e:</u> do | CLE V: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block does cument's effective date on the Departs | be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be lisment of State's records. |
| n da <u>e:</u> do | CLE V: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block does cument's effective date on the Department of the Uther provisions, if any. REQUIRED SIGNATURE: | be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be list ment of State's records. |

Filing Fees:

David W. Pfleegor
Typed or printed name of signee

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

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)