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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Livingston Energy Group Name of L	Limited Liability Company			
	pany for Authorization to Transact Business in Florida." Certificate of enced foreign limited liability company to transact business in Florida.			
Please return all correspondence concerning this matter to the	following:			
Olivia Marine	ime of Person			
Livingston Energy Grap, LLC Firm/Company				
2345 Maxon Road Extension Suitel				
Schenectady, NY 12308 City/State and Zip Code				
legal a Solution, energy E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Contact Person	at (518) 691 - 3119 - Area Code Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE \$\Begin{array}{c} \preceq \text{125.00 Filing Fee} & \Begin{array}{c} \Delta \text{130.00 Filing Fee} & \Begin{array}{c} \Delta \text{155.00 Filing Fee} & \Begin{array}{c} \Delta \text{160.00 Filing Fee}, Certificate \\ Certificate of Status & Certified Copy & of Status & Certified Copy \end{array}				

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

COMPANY TO TRANSACT BU	TION 605.0902, FLORIDA STATUTES, THE P SINESS INTHE STATE OF FLORIDA:			OREIGN LIMITED LIABILITY
1. Lingston E (Name of Foreign I	imited Liability Company; must include "Limit	ed Liability Com	pany," "L.L.C.," or "LLC.")	
If name unavailable, enter alternate na	ame adopted for the purpose of transacting business in	Florida. The alternal	te name must include "Limited Liability Co	ompany," "L.L.C," or "L1.C,")
2. New Yor (Jurisdiction under the law of wh	Kich foreign limited liability company is organized)	38	207 8028 (FEI number, If app	licable)
‡ .	(Date first transacted business in Florida, if prior I (See sections 605.0904 & 605.0905, F.S. to determ	o registration) nine penalty liabilit	у)	
5. 2345 Moxar Street Address of Principal Office)	1 Rd. Ext. Suite 1	62	345 Maxon Rd. Ex	-1. Stel
Schene ctady,		S	henectady, NY 1	
7. Name and street address	s of Florida registered agent: (P.O. Bo	 x_ <u>NOT</u> accep	stable)	1.01
Name:	Registered Agents I	nc	_	P: ::
Office Address:	7901 4th St. N Ste	300	_	ن
	St. Peters burg		, Florida	
designated in this applicat to comply with the provision	ance: gistered agent and to accept service of ion, I hereby accept the appointment ons of all statutes relative to the prope of my position as registered agent.	as registered (agent and agree to act in this	capacity. I further agree
	Bill Have,	s signature)	, Secretary	

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: LIVINGSTON ENERGY GROUP, LLC

DOS ID Number: 4924084

Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Entity Status: EXISTING
Date of Initial Filing with DOS: 04/04/2016

Statement Status: CURRENT Statement Due Date: 04/30/2024

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on February 13, 2023 at 03:20 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Heyles

By Brendan C. Hughes Executive Deputy Secretary of State

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