



| DATE       | DOCUMENT ID  | DESCRIPTION                                     | FILING | EXPED | PENALTY | CERT | COPY |
|------------|--------------|---|--------|-------|---------|------|------|
| 03/26/2015 | 201508401719 | DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG (LCP) | 125.00 | 0.00  | 0.00    | 0.00 | 0.00 |

### Receipt

This is not a bill. Please do not remit payment.

SENECA LOGISTICS GROUP, LLC  
 ATTN: VINCENT M. GRANDILLO  
 491 CIRCULAR ST.  
 TIFFIN, OH 44883

## STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

2378727

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**SENECA LOGISTICS GROUP, LLC**

and, that said business records show the filing and recording of:

Document(s)

**DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG**  
 Effective Date: 03/23/2015

Document No(s):

**201508401719**



United States of America  
 State of Ohio  
 Office of the Secretary of State

Witness my hand and the seal of the  
 Secretary of State at Columbus, Ohio this  
 26th day of March, A.D. 2015.

*Jon Husted*  
 Ohio Secretary of State

*Jon Husted*

Form 533A Prescribed by:  
Ohio Secretary of State  
**JON HUSTED**  
Ohio Secretary of State

Central Ohio: (614) 466-3910  
Toll Free: (877) SOS-FILE (767-3453)  
*www.OhioSecretaryofState.gov*  
*Busserv@OhioSecretaryofState.gov*

Mail this form to one of the following:

Regular Filing (non expedite)  
P.O. Box 670  
Columbus, OH 43216

Expedite Filing (Two-business day processing  
time requires an additional \$100.00).  
P.O. Box 1390  
Columbus, OH 43216

2015 MAR 23 PM 2:25  
2015 MAR -9 AM 11:55

### Articles of Organization for a Domestic Limited Liability Company

Filing Fee: \$125

CHECK ONLY ONE (1) BOX

(1)  Articles of Organization for Domestic  
For-Profit Limited Liability Company  
(115-LCA)

(2)  Articles of Organization for Domestic  
Nonprofit Limited Liability Company  
(115-LCA)

Name of Limited Liability Company

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "Ltd.," or "Ltd"

Effective Date  (The legal existence of the limited liability company begins upon the filing  
(Optional) mm/dd/yyyy of the articles or on a later date specified that is not more than ninety days  
after filing.)

This limited liability company shall exist for   
(Optional) Period of Existence

Purpose   
(Optional)

**\*\*Note for Nonprofit LLCs**  
The Secretary of State does not grant tax exempt status. Filing with our office is not sufficient to obtain state or federal tax exemptions. Contact the Ohio Department of Taxation and the Internal Revenue Service to ensure that the nonprofit limited liability company secures the proper state and federal tax exemptions. These agencies may require that a purpose clause be provided.

### ORIGINAL APPOINTMENT OF AGENT

The undersigned authorized member(s), manager(s) or representative(s) of

Seneca Logistics Group, LLC

Name of Limited Liability Company

hereby appoint the following to be Statutory Agent upon whom any process, notice or demand required or permitted by statute to be served upon the limited liability company may be served. The name and address of the agent is

Martin D. Koop

Name of Agent

215 Jefferson St.

Mailing Address

Tiffin

City

State

44883

ZIP Code

### ACCEPTANCE OF APPOINTMENT

The undersigned, Martin D. Koop named herein as the statutory agent

Statutory Agent Name

for Seneca Logistics, LLC

Name of Limited Liability Company

hereby acknowledges and accepts the appointment of agent for said limited liability company

Statutory Agent Signature 

Individual Agent's Signature / Signature on Behalf of Business Serving as Agent

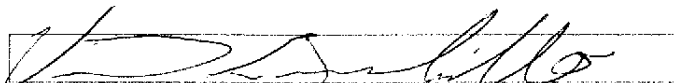
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

**Required**

Articles and original appointment of agent must be signed by a member, manager or other representative.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

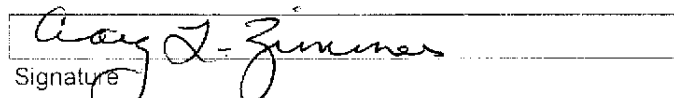
If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

  
Signature

By (if applicable)

Vincent M. Grandillo


Print Name

  
Signature

By (if applicable)

Craig Zimmers

Print Name

  
Signature

By (if applicable)

Jeremy A. Croy

Print Name