

391 2030

Receipt Number: 61287

File Number **DL029256**



ARTICLES_OF_ORGANIZATION

For

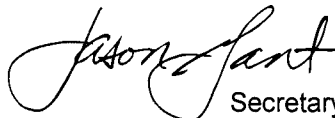
BBP - NPC SD, L.L.C.

Filed at the request of:

DIANE SPIERING
BELIN MCCORMICK
666 WALNUT STREET STE 2000
DES MOINES IA 50309

State of South Dakota
Office of the Secretary of State

Filed in the office of the Secretary of State on: **Thursday, August 30, 2012**


Secretary of State

Fee Received: \$150.00

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

Certificate of Organization Limited Liability Company

ORGANIZATIONAL ID #: DL029256

I, Jason M. Gant, Secretary of State of the State of South Dakota, hereby certify that the Articles of Organization of **BBP - NPC SD, L.L.C.** duly signed and verified, pursuant to the provisions of the South Dakota Limited Liability Company Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I hereby issue this Certificate of Organization and attach hereto a duplicate of the Articles of Organization.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this August 30, 2012.



Jason M. Gant
Secretary of State

391 2032 08/31/2012

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ARTICLES OF ORGANIZATION DOMESTIC LIMITED LIABILITY COMPANY

Please Type or Print Clearly in Ink

Please submit one Original and one Photocopy

FILING FEE: \$150 payable to SECRETARY OF STATE

Filed this 30th day of Aug. 2012
James Jant
SECRETARY OF STATE

RECEIVED
AUG 30 2012
S.D. SEC. OF STATE

Telephone # _____
FAX # _____

Article I

The name of the company is BBP - NPC SD, L.L.C.

The name must contain limited liability company, limited company or the abbreviation L.L.C., LLC, L.C. or LC. Limited may be abbreviated as Ltd. and company may be abbreviated as Co.

Article II

The duration of the company if other than perpetual is Perpetual

Article III

The address of the initial designated office in or out of the State of South Dakota where the company conducts its business.

6200 Aurora Avenue, Suite 601E	Urbandale	IA	50322
Street Address	City	State	ZIP+4
Mailing Address (Optional)	City	State	ZIP+4

Article IV

The South Dakota Registered Agent name CT Corporation System

319 South Coteau Street	Pierre	SD	57501
Street Address or Rural Route Number in This State and	City	State	ZIP+4
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

When listing a Commercial Registered Agent, please state their CRA #.
This number can be obtained from the Commercial Registered Agent.

000002

Article V

The name and address of each organizer

Steven E. Zumbach	666 Walnut Street, Suite 2000	Des Moines	IA	50309
Name	Street Address	City	State	ZIP+4
Name	Street Address	City	State	ZIP+4
Name	Street Address	City	State	ZIP+4
Name	Street Address	City	State	ZIP+4

Article VI

Check one:

- ☐ The company will be member managed.
☒ The company will be manager managed.

If this company is to be manager managed, please state the name and address of each initial manager.

Sandor D. Fein	6200 Aurora Avenue, Suite 601E	Urbandale	IA	50322
Manager	Street Address	City	State	ZIP+4
Manager	Street Address	City	State	ZIP+4
Manager	Street Address	City	State	ZIP+4

Article VII

Whether one or more of the members of the company are to be liable for its debts and obligations as set forth under SDCL 47-34A-303 (c).

No member is to be liable for the debts and obligations of the company.

Article VIII

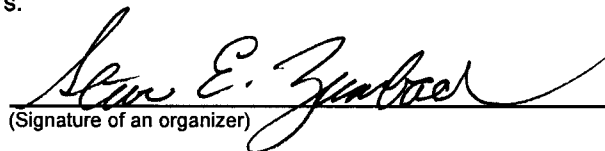
Any other provisions not inconsistent with law, which the members elect to set out in the articles of organization.

None

The Articles of Organization must be executed by the organizers.

Dated 8-28-12

By signing this form, you agree to have both the fee and the form processed electronically. A fee of up to \$40 will be assessed for returned payments.


(Signature of an organizer)

Steven E. Zumbach

(Printed Name)

(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

(Title)

2013

Enter Filing Year

ANNUAL REPORT

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

DOMESTIC LLC

Please Type or Print Clearly In Ink

FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

FILE 6/17/2013

RECEIPT NO 123531

1. L.L.C. ID and Name:

DL029256

BBP - NPC SD, L.L.C.

6200 AURORA AVENUE STE 601E

URBAN DALE, IA 50322-2868

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

6200 AURORA AVENUE STE 601E

URBAN DALE

IA

50322-2868

Street Address

City

State

ZIP+4

Mailing Address

City

State

ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name:

C T CORPORATION SYSTEM

319 S. COTEAU STREET

PIERRE

SD

57501-3108

Street Address or Rural Route Box Number in This State and

City

State

ZIP+4

Mailing Address in This State, if Different from Street Address

City

State

ZIP+4

5. The names and business addresses of its managers. If the L.L.C. is member-managed, the names and addresses of the members need not be set forth.

☐

SANDOR FEIN

6200 AURORA AVENUE, SUITE
601E

URBAN DALE

IA

50322

Manager

Street Address

City

State

ZIP+4

☐

STEVEN ZUMBACH

666 WALNUT STREET, SUITE
2000

DES MOINES

IA

50309

Manager

Street Address

City

State

ZIP+4

☐

WAYNE REAMES

666 WALNUT STREET, SUITE
2000

DES MOINES

IA

50309

Manager

Street Address

City

State

ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Date 06/17/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

KASEY M JOHNSON STEEN

(Printed Name)

2014

Enter Filing Year

ANNUAL REPORT

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

DOMESTIC LLC

Please Type or Print Clearly In Ink

FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

FILE DATE 7/29/2014

RECEIPT NO 219786

1. L.L.C. ID and Name:

DL029256
BBP - NPC SD, L.L.C.
6200 AURORA AVENUE STE 601E
URBANDALE, IA 50322-2868

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

6200 AURORA AVENUE STE 601E	URBANDALE	IA	50322-2868
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
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4. The name of the South Dakota Registered Agent

Agent Name: C T CORPORATION SYSTEM

319 S. COTEAU STREET	PIERRE	SD	57501-3108
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4

Mailing Address in This State, if Different from Street Address	City	State	ZIP+4
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5. The names and business addresses of its managers. If the L.L.C. is member-managed, the names and addresses of the members need not be set forth.

☐ STEVEN ZUMBACH	666 WALNUT STREET, SUITE 2000	DES MOINES	IA	50309
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Manager	Street Address	City	State	ZIP+4
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☐ WAYNE REAMES	666 WALNUT STREET, SUITE 2000	DES MOINES	IA	50309
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Manager	Street Address	City	State	ZIP+4
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No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Dated 07/29/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

STEVEN E ZUMBACH

(Printed Name)

2015

Enter Filing Year

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ANNUAL REPORT

DOMESTIC LLC

SDCL 47-34A-211

Please Type or Print Clearly In Ink

FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

FILE DATE 9/16/2015

RECEIPT NO 335934

Telephone #

1. L.L.C. ID and Name:

DL029256

BBP - NPC SD, L.L.C.

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

6200 AURORA AVENUE STE 601E URBANDALE IA 50322-2868

Actual Street Address or Rural Route Box Number City State ZIP+4

Mailing Address, if Different from Street Address City State ZIP+4

Email Address (Optional)

4. The name of the South Dakota Registered Agent

Agent Name: C T CORPORATION SYSTEM

319 S. COTEAU STREET PIERRE SD 57501-3108

Actual Street Address or Rural Route Box Number in This State City State ZIP+4

Mailing Address in This State, if Different from Street Address City State ZIP+4

Email Address (Optional)

5. The names and business addresses of its managers. If the L.L.C. is member-managed, the names and addresses of the members need not be set forth.

☐ STEVEN ZUMBACH 666 WALNUT STREET, SUITE DES MOINES IA 50309
2000

Manager Actual Street Address City State ZIP+4

☐ WAYNE REAMES 666 WALNUT STREET, SUITE DES MOINES IA 50309
2000

Manager Actual Street Address City State ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.

Dated 09/16/2015

Email

(Optional)

Signature Accepted Electronically

(Signature of an Authorized Person)

NOREEN L CHRISTIANS

(Printed Name)

*By signing this form you agree to have both the fee and the form processed electronically.
A fee of up to \$40 will be assessed for returned payments.

9/16/2015 3:41:23 PM

2016

Enter Filing Year

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ANNUAL REPORT

DOMESTIC LLC

SDCL 47-34A-211; 59-11-24, 24.1

Please Type or Print Clearly In Ink

FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

FILE DATE 8/12/2016

RECEIPT NO 444156

1. LLC ID and Name:

DL029256

Enter LLC ID

BBP - NPC SD, L.L.C.

Enter LLC Name

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

6200 AURORA AVENUE STE 601E URBANDALE IA 50322-2868

Actual Street Address or Rural Route Box Number City State ZIP+4

Mailing Address, if Different from Street Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: C T CORPORATION SYSTEM

319 S. COTEAU STREET PIERRE SD 57501-3108

Actual Street Address or Rural Route Box Number in This State City State ZIP+4

Mailing Address in This State, if Different from Street Address City State ZIP+4

5. The names and business addresses of its principal officers and directors (governors). If, pursuant to SDCL 59-11-24, the board of directors has been eliminated, list the names of the shareholders.

☐	STEVEN ZUMBACH	666 WALNUT STREET, SUITE 2000	DES MOINES	IA	50309
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Manager	Actual Street Address	City	State	ZIP+4
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☐	WAYNE REAMES	666 WALNUT STREET, SUITE 2000	DES MOINES	IA	50309
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Manager	Actual Street Address	City	State	ZIP+4
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No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty (SDCL 47-1A-129).

Dated 08/12/2016

Signature Accepted Electronically

(Signature of an Authorized Person)

NOREEN L CHRISTIANS

(Printed Name)

*By signing this form you agree to have both the fee and the form processed electronically.
A fee of up to \$40 will be assessed for returned payments.

8/12/2016 10:33:22 AM