

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

Certificate of Organization Domestic LLC

ORGANIZATIONAL ID# DL041289

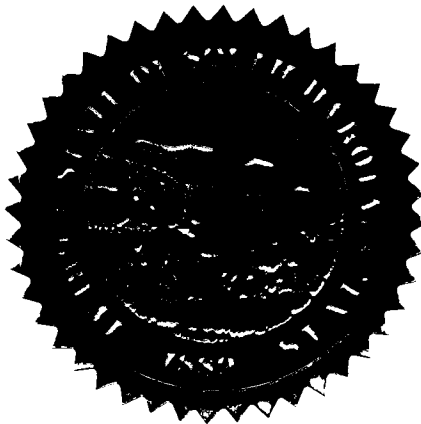
I, **Jason Gant**, Secretary of State of the State of South Dakota, hereby certify that the Articles of Organization of

EBsoil LLC

duly signed and verified, 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
affixed the Great Seal of the
State of South Dakota, at Pierre,
the Capital, this 12/03/2014.



Jason M. Gant
Secretary of State

12/8/2014 2:13:39 PM
Change ID: 1210924

Article V

The name and address of each organizer

Eric Barsness	46043 212 st	volga	sd	57071
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.

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).

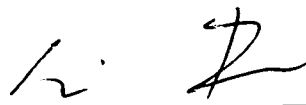
Article VIII

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

The Articles of Organization must be executed by the organizers.

Dated 11/18/14

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)

Eric Barsness

(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)



Secretary of State

Jason M. Gant

State Capitol | 500 E. Capitol Ave. | Pierre, South Dakota 57501 | sdsos@state.sd.us | sdsos.gov

Return To: ERIC BARSNESS KAREN BARSNESS
46043-212TH ST
VOLGA , SD 57071

From: Secretary of State Jason M. Gant
Corporations Division

Filing Date: 12/03/2014

Re: EBsoil LLC (DL041289)
Articles of Organization

The documents on behalf of EBsoil LLC have been received and filed. Attached is the Certificate along with a receipt for the filing fee of \$150.00. Below is a summary of the transaction.

Remitter	Address	Amount Paid
ERIC BARSNESS KAREN BARSNESS	46043-212TH ST VOLGA , SD 57071	\$150.00
Total:		\$150.00

Description	Invoice Date	Qty	Receipt #	Subtotal
Articles of Organization	12/08/2014	1	252305	\$150.00
Total:				\$150.00

Administration	Corporations	Uniform Commercial Code
Tel: (605) 773-3537	Tel: (605) 773-4845	Tel: (605) 773-3537
Fax: (605) 773-6580	Fax: (605) 773-4550	Fax: (605) 773-6580



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; 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 1/11/2016

RECEIPT NO 368863

1. LLC ID and Name:

DL041289

Enter LLC ID

EBsoil LLC

Enter LLC Name

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

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

46043 212 ST	VOLGA	SD	57071
Actual Street Address or Rural Route Box Number	City	State	ZIP+4

Mailing Address, if Different from Street Address	City	State	ZIP+4
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4. The name of the South Dakota Registered Agent

Agent Name: ERIC BARSNESS

46043 212 ST	VOLGA	SD	57071
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
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5. The names and business addresses of its principal officers and directors (governors). If, pursuant to SDCL 47-1A-732(1), the board of directors has been eliminated, list the names of the shareholders.

<input type="checkbox"/>	Manager	Actual Street Address	City	State	ZIP+4
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<input type="checkbox"/>	Manager	Actual Street Address	City	State	ZIP+4
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<input type="checkbox"/>	Manager	Actual Street Address	City	State	ZIP+4
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6. Beneficial Interest (optional)

Owner	Description of Ownership	Percentage/Value
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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

Signature Accepted Electronically

(Signature of an Authorized Person)

ERIC JOHN BARSNESS

(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.

1/11/2016 5:46:55 PM