394 5741 02/15/2013

Receipt Number: 95175

File Number DR001537

STATEMENT_OF_QUALIFICATION

For

KRINGEN FAMILY LIMITED LIABILITY PARTNERSHIP

Filed at the request of:

WOODS FULLER SHULTZ & SMITH
LISA J MAGUIRE
PO Box 5027
SIOUX FALLS SD 57117

State of South Dakota
Office of the Secretary of State

Filed in the office of the Secretary of State on: **Friday, February 08, 2013**

Jason Gant
Secretary of State

Fee Received: $125.00

394 5742

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

STATEMENT OF QUALIFICATION OF A DOMESTIC LIMITED LIABILITY PARTNERSHIP

Please Type or Print Clearly in Ink

Please submit one **Original** and one **Photocopy**

FILING FEE: $125 payable to SECRETARY OF STATE

RECEIVED
FEB 0 8 2013
S.D. SEC. OF STATE

Filed this 8th day of Feb., 2013
Jason Gant
SECRETARY OF STATE

Telephone # (605) 594-2164
FAX #

1. The name of the limited liability partnership is Kringen Family Limited Liability Partnership

The name shall contain the words "Registered Limited Liability Partnership", or "Limited Liability Partnership", or "R.L.L.P." or "L.L.P.", or "RLLP", or "LLP" as the last words of the name

2. The street address of the partnership's chief executive office.

48330 - 250th Street	Garretson	SD	57030
Street Address	City	State	ZIP+4
Mailing Address (Optional)	City	State	ZIP+4

3. If the address listed in number 2 is not a South Dakota street address question number 4 must be completed.

4. The South Dakota Registered Agent name Gregg J. Kringen

48330 - 250th Street	Garretson	SD	57030
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

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

5. The partnership elects to be a limited liability partnership.

6. The deferred effective date of the registration if it is not to be effective upon filing of the registration

N/A

394 5743

I declare under penalty of perjury that the contents of the above statement are accurate. Statement must be signed by at least two partners.

Dated 1/31/13

(Signature of a partner)

Gregg J. Kringen
(Printed Name)

Dated 1/31/13

(Signature of a partner)

Randy M. Kringen
(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.

2014 Enter Filing Year

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

ANNUAL REPORT

DOMESTIC LLP

Please Type or Print Clearly In Ink

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

FILE DATE 2/24/2015

RECEIPT NO 276605

1. L.L.P. ID and Name:
DR001537
KRINGEN FAMILY LIMITED LIABILITY PARTNERSHIP
48330 250TH STREET
GARRETSON, SD 57030-5400

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

3. The address of the principal or chief executive office.

48330 250TH STREET	GARRETSON	SD	57030-5400
Street Address	City	State	ZIP+4
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: GREGG J. KRINGEN

48330 250TH STREET	GARRETSON	SD	57030-5400
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 partners.

☐	GREGG J KRINGEN	48330 250TH	GARRETSON	SD	57030
	Partner	Street Address	City	State	ZIP+4
☐	TODD D KRINGEN	1129 TWIN OAKS DRIVE	MADISON	SD	57042
	Partner	Street Address	City	State	ZIP+4
☐	RANDY M KRINGEN	305 NORTH 1ST AVE	CROOKS	SD	57020
	Partner	Street Address	City	State	ZIP+4
☐					
	Partner	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.

Dated 02/24/2015

Signature Accepted Electronically
(Signature of an Authorized Person)

GREGG J KRINGEN
(Printed Name)

2/24/2015 3:42:54 PM

2015

Enter Filing Year

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

ANNUAL REPORT

DOMESTIC LLP

SDCL 48-7A-1003; 59-11-24.1

Please Type or Print Clearly In Ink

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

FILE DATE 1/28/2016

RECEIPT NO 375926

1. LLP ID and Name:

DR001537
Enter LLP ID

KRINGEN FAMILY LIMITED LIABILITY PARTNERSHIP
Enter LLP Name

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

3. The address of the principal or chief executive office.

48330 250TH STREET	GARRETSON	SD	57030-5400
Actual Street Address or Rural Route Box Number	City	State	ZIP+4
Mailing Address, if Different from Street Address	City	State	ZIP+4

IF ADDRESS IN #3 IS NOT A SOUTH DAKOTA ADDRESS QUESTION #4 IS REQUIRED.

4. The name of the South Dakota Registered Agent

Agent Name: GREGG J. KRINGEN

48330 250TH STREET	GARRETSON	SD	57030-5400
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. Beneficial Interest (optional)

Owner	Description of Ownership	Percentage/Value

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 01/28/2016

Signature Accepted Electronically
(Signature of an Authorized Person)

GREGG J KRINGEN
(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.

1/28/2016 4:26:40 PM