375 4039

Receipt Number: 2033036

File Number DL021587

DL021587

ARTICLES OF ORGANIZATION

ARTICLES_OF_ORGANIZATION

For

DAPRO, L.L.C.

Filed at the request of:

JEFFREY T SVEEN
SIEGEL BARNETT & SCHUTZ LLP
415 S MAIN ST 400 CAPITOL BUILDING
PO BOX 490
ABERDEEN SD 57402

State of South Dakota
Office of the Secretary of State

Filed in the office of the Secretary of State on: **Tuesday, May 25, 2010**

Chris Nelson

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 #: DL021587

I, Chris Nelson, Secretary of State of the State of South Dakota, hereby certify that the Articles of Organization of **DAPRO, 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 affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this May 25, 2010.

Chris Nelson

Chris Nelson
Secretary of State

Cert of Organization LLC Merge

375 4041

Filed this 25th day of May, 2010
Chris Nelson
SECRETARY OF STATE

RECEIVED
MAY 25 2010
S.D. SEC. OF STATE

ARTICLES OF ORGANIZATION OF DAPRO, L.L.C.

I, the undersigned natural person of the age of majority, a resident of the State of South Dakota, acting as organizer of a limited liability company under the South Dakota Uniform Limited Liability Company Act, (SDCL Chapter 47-34A), adopt the following Articles of Organization for such limited liability company.

ARTICLE I

The name of the limited liability company shall be DAPRO, L.L.C. hereinafter referred to as the "Company."

ARTICLE II

The address of the initial designated office of the Company is 40235 US Highway 14, Huron, South Dakota 57350.

ARTICLE III

The name and street address of the initial agent for service of process is Jeffrey T. Sveen, 415 South Main Street, 400 Capitol Building, PO Box 490, Aberdeen, South Dakota 57402-0490.

ARTICLE IV

The name and address of the organizer is Jeffrey T. Sveen, 415 South Main Street, 400 Capitol Building, PO Box 490, Aberdeen, South Dakota 57402-0490

ARTICLE V

The duration of this Company is perpetual from the date of the filing of these Articles of Organization with the Secretary of State or until the earlier dissolution of the Company in accordance with the provisions of its Operating Agreement.

ARTICLE VI

The Company shall be member managed.

ARTICLE VII

The debts, obligations and liabilities of the Company, whether arising in contract, tort, or otherwise, shall be solely the debts, obligations, and liabilities of the Company. A member shall not be personally liable for debts, obligations, or liabilities of the Company solely by reason of being or acting as a member. The failure of the Company to observe the usual Company formalities or

375 4042

requirements relating to the exercise of its Company powers or management of its business shall not be a ground for imposing personal liability on a member for liabilities of the company.

IN WITNESS WHEREOF, I have hereunto set my hand this 19th day of May, 2010.

DAPRO, L.L.C.

By: _____
Its: Organizer

STATE OF SOUTH DAKOTA)
)ss.
COUNTY OF BROWN)

Jeffrey T. Sveen, being first duly sworn upon oath, deposes and states that he is the organizer named in the foregoing Articles of Organization, that he has read the foregoing document and knows the contents thereof and that it is true to his own knowledge, excepting as to matters therein stated on information and belief, and as to such matters, he believes them to be true.

DAPRO, L.L.C.

By: _____
Its: Organizer

Subscribed and sworn to before me this 19th day of May, 2010.

(Notarial Seal)

JANET MILLER NOTARY Seal PUBLIC STATE OF SOUTH DAKOTA

_____
Notary Public, South Dakota
My Commission Expires: 8/21/13

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, Jeffrey T. Sveen, hereby give my consent to serve as the registered agent DAPRO, L.L.C.

Dated 19 May, 2010. _____
Jeffrey T. Sveen

320 1781 05/23/2011

2011 ANNUAL REPORT
DOMESTIC L.L.C.

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

Please Type or Print Clearly in Ink

FILING FEE: $50 Make check payable to SECRETARY OF STATE

FILE DATE 04-26-2011
RECEIPT NO 2148522
RECEIVED
APR 26 2011
S.D. SEC. OF STATE

Telephone # _____

1. L.L.C. Name, Registered Agent Name and Address:

DL021587
DL021587 MAY/0000
DAPRO, L.L.C.
SVEEN, JEFFREY T.
PO BOX 490
ABERDEEN SD 57402-0490

2. ~~The jurisdiction under whose law it is formed~~ South Dakota

3. The address of the principal executive office in or out of the State of South Dakota.

40235 US Highway 14, Huron, SD 57350
Street Address | City | State | ZIP+4

Mailing Address | City | State | ZIP+4

Email Address

4. The name of the South Dakota Registered Agent Jeffrey T. Sveen, 415 South Main Street, 400 Capitol Building, PO BOx 490, Aberdeen, SD 57402-0490
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

Email Address

5. If member-managed, do not complete. If manager-managed, please complete.

Manager | Street Address | City | State | ZIP+4

Manager | Street Address | City | State | ZIP+4

Manager | Street Address | City | State | ZIP+4

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

Dated April 25, 2011

Email _____

(Signature of an Authorized Person)

Jeffrey T. Sveen
(Printed Name)

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

FILING FEE: $10 **Make check payable to SECRETARY OF STATE**

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity _____

_____

2. The name of the registered agent on file _____
(Old Registered Agent)

The name of the successor registered agent _____
(New Registered Agent)

3. If listing a Commercial Registered Agent, please state their identification number _____

4. The address of the agent currently on file for this entity **(Old Registered Agent Address)**

_____
Street Address (Required) City State ZIP+4

_____
Mailing Address City State ZIP+4

5. If the address has changed, list the new registered agent address

_____
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

_____
Email Address

6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

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

Dated _____ _____
(Signature of an Authorized Person)

Email _____ _____
(Printed Name)

2012 Enter Filing Year

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

ANNUAL REPORT

DOMESTIC LLC

Please Type or Print Clearly In Ink

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

FILE 6/5/2012

RECEIPT NO 45550

1. L.L.C. ID and Name:
DL021587
DAPRO, L.L.C.
40235 US HIGHWAY 14
HURON, SD 57350-7913

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

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

40235 US HIGHWAY 14	HURON	SD	57350-7913
Street Address	City	State	ZIP+4
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: JEFFREY T. SVEEN

415 SOUTH MAIN STREET	ABERDEEN	SD	57401-4364
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 490	ABERDEEN	SD	57402-0490
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.

Manager	Street Address	City	State	ZIP+4
Manager	Street Address	City	State	ZIP+4
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 06/05/2012

Signature Accepted Electronically
(Signature of an Authorized Person)

JEFFREY T SVEEN
(Printed Name)

6/5/2012 11:23:03 AM

2013 Enter Filing Year

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

ANNUAL REPORT

DOMESTIC LLC

Please Type or Print Clearly In Ink

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

FILE 6/13/2013
RECEIPT NO 122483

1. L.L.C. ID and Name:
DL021587
DAPRO, L.L.C.
40235 US HIGHWAY 14
HURON, SD 57350-7913

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

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

40235 US HIGHWAY 14	HURON	SD	57350-7913
Street Address	City	State	ZIP+4
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: JEFFREY T. SVEEN

415 SOUTH MAIN STREET	ABERDEEN	SD	57401-4364
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 490	ABERDEEN	SD	57402-0490
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.

Manager	Street Address	City	State	ZIP+4
Manager	Street Address	City	State	ZIP+4
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 06/13/2013

Signature Accepted Electronically
(Signature of an Authorized Person)

JEFFREY T SVEEN
(Printed Name)

6/13/2013 12:28:49 PM

2014 Enter Filing Year

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

ANNUAL REPORT

DOMESTIC LLC

Please Type or Print Clearly In Ink

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

FILE DATE 6/3/2014
RECEIPT NO 206123

1. L.L.C. ID and Name:
DL021587
DAPRO, L.L.C.
40235 US HIGHWAY 14
HURON, SD 57350-7913

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

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

40235 US HIGHWAY 14	HURON	SD	57350-7913
Street Address	City	State	ZIP+4
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: JEFFREY T. SVEEN

415 SOUTH MAIN STREET	ABERDEEN	SD	57401-4364
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 490	ABERDEEN	SD	57402-0490
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.

	Street Address	City	State	ZIP+4
☐ Manager				
☐ Manager				
☐ Manager				

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 06/03/2014

Signature Accepted Electronically
(Signature of an Authorized Person)

JEFF SVEEN
(Printed Name)

6/3/2014 11:40:36 AM

2015 Enter Filing Year

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

ANNUAL REPORT

DOMESTIC LLC

Please Type or Print Clearly In Ink

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

FILE DATE 5/13/2015

RECEIPT NO 301679

1. L.L.C. ID and Name:
DL021587
DAPRO, L.L.C.
40235 US HIGHWAY 14
HURON, SD 57350-7913

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

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

Street Address	City	State	ZIP+4
40235 US HIGHWAY 14	HURON	SD	57350-7913
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: JEFFREY T. SVEEN

Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
415 SOUTH MAIN STREET	ABERDEEN	SD	57401-4364
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4
PO BOX 490	ABERDEEN	SD	57402-0490

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.

	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.

Dated 05/13/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

JEFFREY T SVEEN

(Printed Name)

5/13/2015 3:45:36 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 5/26/2016

RECEIPT NO 420404

1. LLC ID and Name:

DL021587
Enter LLC ID

DAPRO, 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).

40235 US HIGHWAY 14	HURON	SD	57350-7913
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: JEFFREY T. SVEEN

415 SOUTH MAIN STREET	ABERDEEN	SD	57401-4364
Actual Street Address or Rural Route Box Number in This State	City	State	ZIP+4
PO BOX 490	ABERDEEN	SD	57402-0490
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.

☐

Manager	Actual Street Address	City	State	ZIP+4

☐

Manager	Actual Street Address	City	State	ZIP+4

☐

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 (SDCL 47-1A-129).

Dated 05/26/2016

Signature Accepted Electronically

(Signature of an Authorized Person)

JEFFREY T SVEEN

(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.

5/26/2016 9:31:24 AM