



10 JUN 95 / K

Filed this 7th day of April, 1995

RECEIVED  
APR 07 1995  
S.D. SEC. OF STATE

RECEIVED  
APR 07 1995  
S.D. SEC. OF STATE

ARTICLES OF INCORPORATION  
OF  
JSL BRAUN, INC.

*Joyce Hazeltine*

SECRETARY OF STATE

Executed by the undersigned for the purpose of forming a South Dakota Corporation under Chapters 47-2 through 47-9, of the South Dakota Codified laws, more commonly known as the "South Dakota Business Corporation Act". *DB-35676*

ARTICLE I

The name of the Corporation is JSL Braun, Inc.

ARTICLE II

The period of existence is perpetual.

ARTICLE III

The purpose or purposes for which the corporation is organized:

(A) To enjoy all the powers, rights and privileges granted by the South Dakota Business Corporation Act and all powers confirmed by all acts heretofore or hereafter amendatory of or supplemental to that Act, and the enumeration of power herein specified, if any, is not intended as exclusion of or as a waiver of any of the powers, rights or privileges granted or confirmed by that Act as it exists now or hereafter. To engage in any lawful act or activities for which the Corporation may be organized under the laws of the State of South Dakota.

(B) To acquire farm properties and other real estate by purchase, lease or otherwise, improve and develop the same and thereon to plant, sow, cultivate, and harvest grains, hay, forage, vegetables, fruit, and all kinds of farm produce and products of the soil. To breed, raise, buy pasture, prepare for market exhibit, sell and deal in livestock of all kinds, which is to include livestock. In general, to conduct in all their several departments and branches, the business of farmers, ranchers, dairymen, stock raisers, and to do everything incidental or conducive to the full accomplishment of the foregoing objects.

ARTICLE IV

The number of shares that the corporation shall have the authority to issue, itemized by class, par value of shares, shares without par value, and series, if any, within a class:

<u>CLASS</u>	<u>NUMBER OF SHARES</u>	<u>PAR VALUE PER SHARE</u>
Common	1,000,000	\$1.00

ARTICLE V

The preferences, limitation, designations and relative rights of each class or series of stock: Common stock shall have no preferences. The Board of Directors may, by appropriate By-Law restrict or limit the transfer of shares.

ARTICLE VI

The corporation will not commence business until consideration of the value of at least \$1,000.00 has been received for the issuance of shares.

ARTICLE VII

That the address of the Corporations's registered office is Main Street, Warner, South Dakota 57479 and the name of the registered agent is John Braun. (mailing address PO Box 48, Warner, SD)

ARTICLE VIII

That the number of Directors of the Corporation shall be fixed from time to time by the Corporation's By-Laws and may be increased or decreased as therein provided. The number constituting the initial Board is three (3), and the name and address of each person who is to serve as a Director until the first annual meeting of

shareholders or until a successor has been elected and qualified is as follows:

<u>NAME</u>	<u>ADDRESS</u>
John Braun	P. O. Box 48 Warner, SD 57479
Stacy Tuszka	6107 Logan Avenue South Minneapolis, MN 55419
Lori Stouten	1436 Willow Creek Lane Shoreview, MN 55126

ARTICLE IX

That the name and address of each incorporator is as follows:


<u>NAME</u>	<u>ADDRESS</u>
John Braun	P. O. Box 48 Warner, SD 57479
Stacy Tuszka	6107 Logan Avenue South Minneapolis, MN 55419
Lori Stouten	1436 Willow Creek Lane Shoreview, MN 55126


ARTICLE X

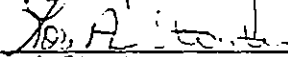
The private property of the stockholders of the Corporation shall not be subject to the payment of and no stockholder shall be individually responsible for the Corporate debts except as for such amount as may remain unpaid on his capitol stock.

These Articles may be amended in the manner authorized by law at the time of amendment.

Executed in duplicate on the 22 day of March, 1995.

  
\_\_\_\_\_  
John Braun

  
\_\_\_\_\_  
Stacy Tuszka

  
\_\_\_\_\_  
Lori Stouten

0000 11 11 11  
0000 11 11 11  
0000 11 11 11

State of South Dakota )  
 )ss  
County of Brown )

On this the 28 day of March 1995, before me, the undersigned officer, personally appeared John Braun known to me or satisfactorily proven to be the person whose name is subscribed to the within instrument and acknowledge that he executed the same for the purposes therein contained.

IN WITNESS WHEREOF I hereunto set my hand and official seal.

(SEAL)

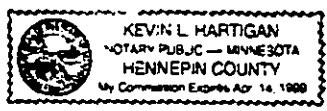
Marilyn Little  
Notary Public, Brown County  
South Dakota  
My Commission Expires: 8-30-96

State of Minnesota )  
 )ss  
County of Hennepin )

On this the 3rd day of April 1995, before me, the undersigned officer, personally appeared Stacy Tuszka, known to me or satisfactorily proven to be the person whose name is subscribed to the within instrument and acknowledge that she executed the same for the purposes therein contained.

IN WITNESS WHEREOF I hereunto set my hand and official seal.

(SEAL)



K. Hartigan  
Notary Public, Minnesota  
My Commission Expires: 4-14-98

00000000

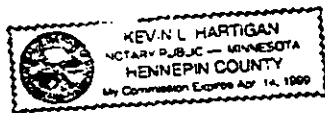
00000000

State of Minnesota )  
  : ss  
County of Hennepin )

On this the 3<sup>rd</sup> day of April 1995, before me, the undersigned officer, personally appeared Lori Stouten known to me or satisfactorily proven to be the person whose name is subscribed to the within instrument and acknowledge that she executed the same for the purposes therein contained.

IN WITNESS WHEREOF I hereunto set my hand and official seal.

(SEAL)



K. Hartigan  
Notary Public, Minnesota  
My Commission Expires:

RECORDED  
2025 JUN 10  
3/27/95

ACCEPTANCE OF REGISTERED AGENT

I, John Braun hereby accept the designation as registered agent for JSL Braun, Inc.

Dated this 28 day of March, 1995.

  
\_\_\_\_\_  
John Braun

95052690760  
5/2/95

RECEIPT NO. 456309  
FILE NO. DB-03567E  
FEE RECEIVED: \$ 100  
ART OF INC  
OF  
JSL BRAUN, INC.  
1,000.000 CM AT \$:

Filed at the Request of:

THOMAS TONNER  
ATTORNEY AT LAW  
PO BOX 1456  
ABERDEEN SD 57402

State of South Dakota ss  
Office of the Secretary of State

Filed in the office of the Secretary of  
State on April 7, 1995.

\_\_\_\_\_  
JOYCE HAZELTINE  
Secretary of State

By \_\_\_\_\_  
Deputy



RETURN TO  
SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845

9:0277 0613  
QUALIFICATION  
FOR FAMILY FARM CORPORATION  
AND AUTHORIZED FARM CORPORATION

No Filing Fee

RECEIVED  
MAY 21 1996  
S.D. SEC. OF STATE  
RECEIVED

Pursuant to the provisions of the Family Farm Act of 1974, SDCL 47-9A the following report is filed in order to qualify to engage in farming as defined under the terms of said Act.

1. The name of the corporation is JSL Braun, Inc. MAY 11 1996
2. The state of its incorporation is South Dakota
3. The address of the registered office and the name of the registered agent in South Dakota is John Braun  
Main Street, P. O. Box 48, Warner, SD 57479 Zip+4 \_\_\_\_\_
4. If a foreign corporation, the address of its principal office or registered office in its state of incorporation is \_\_\_\_\_  
Zip+4 \_\_\_\_\_
5. List the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation and used for the growing of crops or the keeping or feeding of poultry or livestock:  
NW 1/4 26-122-63 Brown County SD.  
NE 1/4 28-122-63 ex land deeded Brown County SD.
6. The names and addresses of the officers and the board of directors: (Both officers and directors are to be listed even though they may be the same.)
- President John Braun, P. O. Box 48, Warner, SD 57479
- Vice President \_\_\_\_\_
- Secretary Stacy Tuszka, 6107 Logan Ave. S., Minneapolis, MN 55419
- Treasurer 1436 Willow Creek Lane, Shoreview, MN 55126
- Director John Braun, P. O. Box 48, Warner, SD 57479
- Director Stacy Tuszka, 6107 Logan Ave. S., Minneapolis, MN 55419
- Director Lori Stouten, 1436 Willow Creek Lane, Shoreview, MN 55126

7. Please check which applies to this corporation.

FAMILY FARM CORPORATION  AUTHORIZED FARM CORPORATION \_\_\_\_\_

\* (A) Applies to a FAMILY FARM CORPORATION. (SDCL 47-9A-14) The number of shares owned by person(s) residing on the farm or actively engaged in farming, or their relatives within the third degree of kindred, or who has resided on or has actively operated the farm is 300,000. Degree of kindred is defined as the number of generations with each generation being a degree (SDCL 29-1-10).

\* OR

The number of shares owned by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is \_\_\_\_\_.

(B) Applies only to AUTHORIZED FARM CORPORATION. (SDCL 47-9A-15) The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is \_\_\_\_\_ % (Must not exceed 20% of its gross receipts).



NONNN

9:08277.0603

Receipt No. \_\_\_\_\_

File No. DF035676.

STATE OF SOUTH DAKOTA  
OFFICE OF THE SECRETARY OF STATE

SS.

FARM QUALIFICATION

For

JSL BRAUN, INC.

File at the request of:

THOMAS P. TONNER  
116 S LINCOLN  
ABERDEEN SD 57402-1456


Filed in the office of Secretary of State on

Date



JOYCE HAZELTINE

Secretary of State

Fee Recieved 

SOS CRP 491 10/93

406-773-4550

1996  
RETURN TO  
SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845  
FAX (605) 773-4550

# ANNUAL REPORT

DOMESTIC  
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE  
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE 7-11-96  
RECEIPT NO. 546354

RECEIVED

MAY 21 1996

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DF 035676  
DB-035676 APR/00  
JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER, SD 57479-0048

Telephone # 605-225-4890  
FAX # 605-225-4931

Federal Taxpayer ID  
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

### \*\*\*\*\* ATTENTION - FILING INSTRUCTIONS \*\*\*\*\*

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

\*\*\*\*\*  
2. The character of the business in which it is actually engaged in South Dakota farming

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP - 4
John Braun	President	P. O. Box 48, Warner, SD	57479		
Stacy Tuszka	Secretary	6107 Logan Ave. S., Minneapolis, MN	55419		
Lori Stouten	Treasurer	1436 Willow Creek Lane, Shoreview, MN	55126		

SD law requires at least one director.  
Do the above listed officers serve also as directors? YES X NO \_\_\_ If no, list directors below.

Director \_\_\_\_\_  
Director \_\_\_\_\_

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE  
1,000,000 \_\_\_\_\_ 41

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES  
300,000 \_\_\_\_\_

6. The amount of its stated capital is \$ 300,000.00 (Money received for issued shares)

The report must be signed by the chairman of the board of directors, its president, or any other officer in the presence of a notary public.

Dated 3-26-96 19\_\_\_\_  
By [Signature]  
(Signature) \_\_\_\_\_  
its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Littrell a notary public, do hereby certify that on this 26 day of March 1996, personally appeared before me John Braun who, being by me first duly sworn, declared that he/she is the President of JSL Inc.

that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.  
My Commission Expires 2-30-1996  
Marilyn Littrell  
Notary Public

(Notarial Seal)

SOS CRP 410 10/95

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-6077  
605-773-4845

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date: \_\_\_\_\_  
Receipt No.: \_\_\_\_\_

**FILING FEE: \$5** In addition to annual report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_  
\_\_\_\_\_
2. The previous street address, or a statement that there is no street address, of its registered office \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor registered agent is \* \_\_\_\_\_  
\* The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement must be signed by the chairman of the board of directors, or by its president, or by another of its officers in the presence of a notary public.

Date \_\_\_\_\_ 19 \_\_\_\_\_  
\_\_\_\_\_  
(signature)  
\_\_\_\_\_  
(title)

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_ ss

I, \_\_\_\_\_, a notary public, do hereby certify that on this \_\_\_\_\_ day  
of \_\_\_\_\_ 19 \_\_\_\_\_, personally appeared before me \_\_\_\_\_  
who, being by me first duly sworn, declared that he/she is the \_\_\_\_\_ of \_\_\_\_\_  
\_\_\_\_\_ that he/she signed the foregoing document as officer of the  
corporation, and the statements therein contained are true.

My Commission Expires \_\_\_\_\_  
\_\_\_\_\_  
Notary Public

(Notarial Seal)

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, \_\_\_\_\_, hereby give my consent to serve as the  
(name of registered agent)  
registered agent for \_\_\_\_\_  
(corporate name)

Dated \_\_\_\_\_ 19 \_\_\_\_\_  
\_\_\_\_\_  
(signature)



SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date: \_\_\_\_\_  
Receipt No.: \_\_\_\_\_

**FILING FEE: \$5** In addition to annual report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_  
\_\_\_\_\_
2. The previous street address, or a statement that there is no street address, of its registered office \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor registered agent is \* \_\_\_\_\_  
\* The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement must be signed by the chairman of the board of directors, or by its president, or by another of its officers in the presence of a notary public.

Date \_\_\_\_\_ 19 \_\_\_\_\_  
\_\_\_\_\_  
(signature)  
\_\_\_\_\_  
(title)

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_ ss

I, \_\_\_\_\_, a notary public, do hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_ 19 \_\_\_\_\_, personally appeared before me \_\_\_\_\_ who, being by me first duly sworn, declared that he/she is the \_\_\_\_\_ of \_\_\_\_\_ that he/she signed the foregoing documents as officer of the corporation, and the statements therein contained are true.

My Commission Expires \_\_\_\_\_  
\_\_\_\_\_  
Notary Public

(Notarial Seal)

<b>CONSENT OF APPOINTMENT BY THE REGISTERED AGENT</b>	
I, _____, hereby give my consent to serve as the	
(name of registered agent)	
registered agent for _____	
(corporate name)	
Dated _____ 19 _____	_____
	(signature)

RETURN TO  
SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845  
FAX (605) 773-4550

3705187-561  
7/1/97

# ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK  
NO FILING FEE

FILING DATE: Due during the month the  
Certificate of Incorporation was issued, and  
delinquent the last day of the following month.

FILE DATE 4-18-97  
FILE NO. 620732

RECEIVED  
APR 18 1997  
S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

① The name of the corporation is JSL Braun Inc.

The state of incorporation is South Dakota

② The name of the registered agent in South Dakota and the registered office address is John Braun

Box 48 Warner, Sd 57479 Zip + 4 \_\_\_\_\_

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
_____	_____	_____

⑥ The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
_____	_____	_____	_____

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is \_\_\_\_\_%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated 4-17 19 97

By [Signature]  
(Signature)

Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Littrell, a notary public, do hereby certify that on this 17 day of April 19 97, personally appeared before me John Braun who, being by me first duly sworn, declared that he/she is the President of JSL Braun Inc. that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 8-30-2004

[Signature]  
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

1998

RETURN TO  
SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5070  
605-773-4845  
FAX (605) 773-4550

ANNUAL REPORT

DOMESTIC  
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$25 MAKE CHECK PAYABLE TO SECRETARY OF STATE  
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE 4-21-98  
RECEIPT NO. 706927

RECEIVED RECEIVED

APR 21 1998 APR 09 1998

1. Corporate Name, Registered Agent and Registered Address:

DF-035676  
JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER, SD 57479-0048

APR/97

SD. SEC. OF STATE, SEC. OF STATE  
Telephone # 605-225-7877

FAX # 605-229-4091

Federal Taxpayer ID

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

\*\*\*\*\* ATTENTION - FILING INSTRUCTIONS \*\*\*\*\*

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

\*\*\*\*\*

2. The character of the business in which it is actually engaged in South Dakota \_\_\_\_\_

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP + 4
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

SD law requires at least one director.

Do the above listed officers serve also as directors? YES \_\_\_ NO \_\_\_ If no, list directors below.

Director \_\_\_\_\_  
Director \_\_\_\_\_

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class.

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ \_\_\_\_\_ (Money received for issued shares)

The report must be signed by the chairman of the board of directors, its president, or any other officer in the presence of a notary public.

Dated 4-6 19 98

By John Braun  
(Signature)  
Its Pres.  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, MARILYN LITTELL a notary public, do hereby certify that on this 6 day of April 19 98, personally appeared before me John BRAUN who, being by me first duly sworn, declared that he/she is the President of JSL BRAUN Inc

that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.  
My Commission Expires 2-30-2004  
Marilyn Littell  
Notary Public

(Notariai Seal)

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5070  
605-773-4845

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date: \_\_\_\_\_  
Receipt No.: \_\_\_\_\_

**FILING FEE: \$10** In addition to annual report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_  
\_\_\_\_\_
2. The previous street address, or a statement that there is no street address, of its registered office \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor registered agent is \_\_\_\_\_  
\* The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement must be signed by the chairman of the board of directors, or by its president, or by another of its officers in the presence of a notary public.

Date \_\_\_\_\_ 19 \_\_\_\_\_  
\_\_\_\_\_  
(signature)  
\_\_\_\_\_  
(title)

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_ su

I, \_\_\_\_\_, a notary public, do hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_ 19 \_\_\_\_\_, personally appeared before me \_\_\_\_\_ who, being by me first duly sworn, declared that he/she is the \_\_\_\_\_ of \_\_\_\_\_ that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires \_\_\_\_\_  
\_\_\_\_\_  
Notary Public

(Notarial Seal)

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, \_\_\_\_\_, hereby give my consent to serve as the  
(name of registered agent)  
registered agent for \_\_\_\_\_  
(corporate name)

Dated \_\_\_\_\_ 19 \_\_\_\_\_  
\_\_\_\_\_  
(signature)

RETURN TO  
SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845  
FAX (605) 773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK  
NO FILING FEE

FILING DATE: Due during the month the  
Certificate of Incorporation was issued, and  
delinquent the last day of the following month.

FILE DATE 4-21-98  
FILE NO. \_\_\_\_\_

APR 9 1998 RECEIVED

S.D. SEC. OF STATE APR 09 1998

S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

- The name of the corporation is JSL Braun Inc  
The state of incorporation is South Dakota
- The name of the registered agent in South Dakota and the registered office address is John Braun  
Box 48 Lawrence South Dakota Zip + 4 57479
- If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

- List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation  
\_\_\_\_\_  
\_\_\_\_\_

- List only the changes of the names or addresses of the officers and directors  
NAME REPLACED AS OFFICER OR DIRECTOR  
\_\_\_\_\_  
\_\_\_\_\_

- The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000  
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

- List changes only of names, address and number of shares owned by shareholders  
NAME ADDRESS NUMBER OF SHARES DEGREE OF KINDRED  
\_\_\_\_\_  
\_\_\_\_\_

- The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated 4-6 19 98

By John Braun  
(Signature)  
Its Pres.  
(Title)

STATE OF South Dakota  
COUNTY OF Brown SS

I, MARILYN LITTELL, a notary public, do hereby certify that on this 6 day of April 19 98, personally appeared before me John Braun who, being by me first duly sworn, declared that he/she is the President of JSL BRAUN INC that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true

My Commission Expires 8-30-2004

Marilyn Littell  
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

1999

RETURN TO  
SECRETARY OF STATE  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845  
FAX (605) 773-4550

**ANNUAL REPORT**

DOMESTIC  
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$25 MAKE CHECK PAYABLE TO SECRETARY OF STATE  
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

3076197.1731  
5/21/99

FILE DATE 5-17-99  
RECEIPT NO. 399164

RECEIVED

MAY 17 1999

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DF-035676 JSL BRAUN, INC. BRAUN, JOHN MAIN ST PO BOX 48 WARNER, SD 57479-0048	APR/98
--	--------

Telephone # 605-225-4897

FAX # \_\_\_\_\_

Federal Taxpayer ID # \_\_\_\_\_

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

\*\*\*\*\* ATTENTION - FILING INSTRUCTIONS \*\*\*\*\*

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

\*\*\*\*\*

2. The character of the business in which it is actually engaged in South Dakota \_\_\_\_\_

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

SD law requires at least one director.

Do the above listed officers serve also as directors? YES \_\_\_ NO \_\_\_ If no, list directors below.

Director \_\_\_\_\_  
Director \_\_\_\_\_

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ \_\_\_\_\_ (Money received for issued shares)

The report must be signed by the chairman of the board of directors, its president, or any other officer in the presence of a notary public.

Dated May 7 1999

By [Signature]  
(Signature)

Its President  
(Title)

STATE OF South Dakota ss

COUNTY OF Brown

I, Marilyn Littrell, a notary public, do hereby certify that on this 7 day of May 1999,

personally appeared before me John Braun who, being by me first duly sworn, declared that he/she is the

President of JSL Braun Inc the corporation

named above, and signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 8-30-2004

[Signature]  
Notary Public

(Notarial Seal)

SOS CRP 6/98

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

**FILING FEE: \$10 in addition to annual report fee**

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_
2. The previous street address, or a statement that there is no street address, of its registered office \_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor registered agent is " \_\_\_\_\_  
The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated \_\_\_\_\_ 19 \_\_\_\_\_  
\_\_\_\_\_  
(Signature)  
\_\_\_\_\_  
(Title)

STATE OF \_\_\_\_\_ ss  
COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, a notary public, do hereby certify that on this \_\_\_\_\_ day  
of \_\_\_\_\_ 19 \_\_\_\_\_, personally appeared before me \_\_\_\_\_  
who, being by me first duly sworn, declared that he/she is the \_\_\_\_\_ of \_\_\_\_\_  
\_\_\_\_\_ that he/she signed the foregoing document as officer of  
the corporation, and the statements therein contained are true.

My Commission Expires \_\_\_\_\_  
\_\_\_\_\_  
Notary Public

(Notarial Seal)

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, \_\_\_\_\_, hereby give my consent to serve as the  
(name of registered agent)  
registered agent for \_\_\_\_\_  
(corporate name)

Dated \_\_\_\_\_ 19 \_\_\_\_\_  
\_\_\_\_\_  
(signature)

RETURN TO  
SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845  
FAX (605) 773-4550

2008197.1761  
**ANNUAL FARM REPORT**

PLEASE TYPE OR USE BLACK INK  
NO FILING FEE

FILING DATE: Due during the month the  
Certificate of Incorporation was issued, and  
delinquent the last day of the following month.

FILE DATE \_\_\_\_\_  
FILE NO. \_\_\_\_\_

RECEIVED

MAY 17 1999

SECRET STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is JSL Braun Inc.

The state of incorporation is South Dakota

2. The name of the registered agent in South Dakota and the registered office address is John Braun  
Box 48 Warner South Dakota Zip + 4 57479

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

5. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000  
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is \_\_\_\_\_%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated May 7 19 99

By [Signature]  
(Signature)

Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Littrell, a notary public, do hereby certify that on this 7 day of May 19 99, personally appeared before me John Braun who, being by me first duly sworn, declared that he/she is the President of JSL Braun Inc. that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 8-30-2004

[Signature]  
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

2000

RETURN TO  
SECRETARY OF STATE  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845  
FAX (605) 773-4550

**ANNUAL REPORT**  
DOMESTIC  
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$25 MAKE CHECK PAYABLE TO SECRETARY OF STATE  
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE 5-1-2000  
RECEIVED  
RECEIPT NO. 88019  
MAY 1 2000 APR 14 2000  
STATE OF S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DF-035676 APR/1999  
JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER SD 57479-0048

Telephone # 605-225-4897  
FAX # 605-229-4091  
Federal Taxpayer ID \_\_\_\_\_  
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

\*\*\*\*\* ATTENTION - FILING INSTRUCTIONS \*\*\*\*\*

IF ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.  
\*\*\*\*\*

2. The character of the business in which it is actually engaged in South Dakota \_\_\_\_\_

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

SD law requires at least one director.

Do the above listed officers serve also as directors? YES \_\_\_ NO \_\_\_ If no, list directors below.

Director \_\_\_\_\_  
Director \_\_\_\_\_

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ \_\_\_\_\_. (Money received for issued shares)

The report must be signed by the chairman of the board of directors, its president, or any other officer in the presence of a notary public.

Dated 4-12-2000

By [Signature]  
(Signature)  
its president  
(Title)

STATE OF South Dakota ss  
COUNTY OF BROWN

On this the 12 day of April, 2000, before me, Marilyn Littrell  
personally appeared John Praun, known to me, or proved to me,  
to be the President of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.

My Commission Expires 8-30-2004

[Signature]  
Notary Public

(Notarial Seal)

SOS CRP 11/89

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

**FILING FEE: \$10 In addition to annual report fee**

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_
2. The previous street address, or a statement that there is no street address, of its registered office \_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
ZIP + 4 \_\_\_\_\_

4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor registered agent is \* \_\_\_\_\_

\*The Consent of Registered Agent below must be completed by the new agent.

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
  7. This change has been authorized by resolution duly adopted by the board of directors.
- The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated \_\_\_\_\_ (Signature) \_\_\_\_\_

(Title) \_\_\_\_\_

STATE OF \_\_\_\_\_ ss  
COUNTY OF \_\_\_\_\_

On this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_  
personally appeared \_\_\_\_\_, known to me, or proved to me,  
to be the \_\_\_\_\_ of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.

My Commission Expires \_\_\_\_\_ Notary Public \_\_\_\_\_

(Notarial Seal)

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, \_\_\_\_\_, hereby give my consent to serve as the  
(name of registered agent)  
registered agent for \_\_\_\_\_  
(corporate name)

Dated \_\_\_\_\_ (signature) \_\_\_\_\_

RETURN TO  
SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845  
FAX (605) 773-4550

# ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK

NO FILING FEE

FILING DATE: Due during the month the  
Certificate of Incorporation was issued, and  
delinquent the last day of the following month.

RECEIVED

MAY 1 2000

S.D. SEC. OF STATE

FILE DATE \_\_\_\_\_  
FILE NO. \_\_\_\_\_

RECEIVED

APR 14 2000

S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is JSL Braun Inc.

The state of incorporation is South Dakota

2. The name of the registered agent in South Dakota and the registered office address is John Braun

Box 48 Warner, South Dakota Zip + 4 57479

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

5. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is farming 1000. (Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 100%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated \_\_\_\_\_

By [Signature]  
(Signature)

STATE OF South Dakota ss

Is President  
(Title)

COUNTY OF Brown

On this the 12 day of April, 2000 before me, Marilyn Littrell

personally appeared John Braun, known to me, or proved to me,

to be the President of the corporation that is described in and that executed the within

instrument and acknowledged to me that such corporation executed the same.

My Commission Expires 8-30-2004

[Signature]  
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

2001

RETURN TO  
SECRETARY OF STATE  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845  
FAX (605) 773-4550

**ANNUAL REPORT**

DOMESTIC  
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$25 MAKE CHECK PAYABLE TO SECRETARY OF STATE  
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE 4-19-01  
RECEIPT NO. 974788

RECEIVED

APR 19 01

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DF-035676 APR/2000  
JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER SD 57479-0048

Telephone # 605-225-4897

FAX # \_\_\_\_\_

Federal Taxpayer ID \_\_\_\_\_

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

\*\*\*\*\* ATTENTION - FILING INSTRUCTIONS \*\*\*\*\*

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota \_\_\_\_\_

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

SD law requires at least one director.

Do the above listed officers serve also as directors? YES \_\_\_ NO \_\_\_ If no, list directors below.

Director \_\_\_\_\_  
Director \_\_\_\_\_

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ \_\_\_\_\_ (Money received for issued shares)

The report must be signed by the chairman of the board of directors, its president, or any other officer in the presence of a notary public.

Dated 3-27-01

By [Signature]  
(Signature)

Its President, Registered Agent  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

On this the 27 day of March 2001, before me, MARILYN LITTFRELL, known to me, or proved to me, personally appeared John Braun, to be the President of the corporation that is described in and that executed the within instrument and acknowledged to me that such corporation executed the same.

My Commission Expires 8-30-01

[Signature]  
Notary Public

(Notary Seal)

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

**FILING FEE: \$10 in addition to annual report fee**

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_
2. The previous street address, or a statement that there is no street address, of its registered office \_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor registered agent is \* \_\_\_\_\_  
\*The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated \_\_\_\_\_  
\_\_\_\_\_  
(Signature)  
\_\_\_\_\_  
(Title)

STATE OF \_\_\_\_\_ ss  
COUNTY OF \_\_\_\_\_

On this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_  
personally appeared \_\_\_\_\_, known to me, or proved to me,  
to be the \_\_\_\_\_ of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.

My Commission Expires \_\_\_\_\_  
\_\_\_\_\_  
Notary Public  
(Notarial Seal)

<b><u>CONSENT OF APPOINTMENT BY THE REGISTERED AGENT</u></b>	
I, _____ (name of registered agent)	hereby give my consent to serve as the
registered agent for _____ (corporate name)	
Dated _____	_____ (signature)

RETURN TO  
SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845  
FAX (605) 773-4550

# ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK

NO FILING FEE

FILING DATE: Due during the month the  
Certificate of Incorporation was issued, and  
delinquent the last day of the following month.

FILE DATE \_\_\_\_\_  
FILE NO. \_\_\_\_\_

RECEIVED

APR 19 '01

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is JSL BRAUN INC.

The state of incorporation is South Dakota

2. The name of the registered agent in South Dakota and the registered office address is John BRAUN

PO Box 48 WARNER South Dakota Zip + 4 57479-0048

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

5. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000  
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 100%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated 3-27-01 By [Signature]  
(Signature)

STATE OF South Dakota SS its President - Registered Agent  
COUNTY OF Brown (Title)

On this the 27 day of March 2001, before me, MARILYN LITRELL  
personally appeared John BRAUN, known to me, or proved to me,  
to be the President of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.

My Commission Expires 3-30-04 Marilyn Littrell  
Notary Public

(Notarial Seal)

\*K10202021511098

2002

ANNUAL REPORT

020721501698  
718102

DOMESTIC  
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$25 MAKE CHECK PAYABLE TO SECRETARY OF STATE  
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE 6-6-02  
RECEIPT NO. 1106311  
RECEIVED  
JUN 6 02

1. Corporate Name, Registered Agent and Registered Address:



DF-035676 APR/2001  
JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER SD 57479-0048

Telephone # 605-225-4877  
FAX # \_\_\_\_\_  
Federal Taxpayer ID \_\_\_\_\_  
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

\*\*\*\*\* ATTENTION - FILING INSTRUCTIONS \*\*\*\*\*

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota \_\_\_\_\_

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

SD law requires at least one director.  
Do the above listed officers serve also as directors? YES \_\_\_ NO \_\_\_ If no, list directors below.  
Director \_\_\_\_\_  
Director \_\_\_\_\_

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized)	CLASS	SERIES	PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ \_\_\_\_\_ (Money received for issued shares)

The report must be signed by the chairman of the board of directors, its president, or any other officer in the presence of a notary public.

Dated 6-4-02  
By John Braun  
(Signature)  
Its President + Registered Agent  
(Title)

STATE OF South Dakota ss  
COUNTY OF Brown

On this the 4 day of June, 2002, before me, Marilyn Littrell  
personally appeared John Braun, known to me, or proved to me,  
to be the President of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.

My Commission Expires 8-30-2004  
Marilyn Littrell  
Notary Public

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

**FILING FEE: \$10 in addition to annual report fee**

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_
2. The previous street address, or a statement that there is no street address, of its registered office \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor registered agent is \* \_\_\_\_\_  
\*The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated \_\_\_\_\_  
\_\_\_\_\_  
(Signature)  
\_\_\_\_\_  
(Title)

STATE OF \_\_\_\_\_ ss  
COUNTY OF \_\_\_\_\_

On this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_  
personally appeared \_\_\_\_\_, known to me, or proved to me,  
to be the \_\_\_\_\_ of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.

My Commission Expires \_\_\_\_\_  
\_\_\_\_\_  
Notary Public  
(Notarial Seal)

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, \_\_\_\_\_, hereby give my consent to serve as the  
(name of registered agent)  
registered agent for \_\_\_\_\_  
(corporate name)

Dated \_\_\_\_\_  
\_\_\_\_\_  
(signature)

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL AVE.  
PIERRE, S.D. 57501  
(605)773-4845  
Fax (605)773-4550

**ANNUAL FARM REPORT**  
PLEASE TYPE OR USE BLACK INK  
NO FILING FEE

05/21/02 501698  
778/02

FILE DATE \_\_\_\_\_  
RECEIPT NO. \_\_\_\_\_  
**RECEIVED**  
JUN 6 02  
S.D. SEC. OF STATE

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent the last day of the following month.

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is JSL BRAUN INC  
The state of incorporation is SOUTH DAKOTA

2. The name of the registered agent in South Dakota and the registered office address is John BRAUN  
P.O. Box 48 WARNER SD 57479-0048

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

5. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree.) #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 100 %.  
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 6-4-02  
STATE OF SOUTH DAKOTA  
COUNTY OF BROWN  
On this the 4 day of JUNE, 2002, before me, Marilyn Littrell  
personally appeared John BRAUN, known to me, or proved to me,  
to be the President of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.

My Commission Expires 8-30-2004  
Marilyn Littrell  
(Notary Public)

(Notarial Seal)

2003

ANNUAL REPORT

0305223.2453  
5/20/03

FILE DATE 4-1-03  
RECEIVED  
1195943  
MAR 17 03

DOMESTIC  
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$25 MAKE CHECK PAYABLE TO SECRETARY OF STATE  
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:



DF-035676 APR/2002  
JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER SD 57479-0048

Telephone # 605-225-4897  
FAX # 605-  
Federal Taxpayer:  
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

\*\*\*\*\* ATTENTION - FILING INSTRUCTIONS \*\*\*\*\*

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota \_\_\_\_\_

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

SD law requires at least one director.  
Do the above listed officers serve also as directors? YES \_\_\_ NO \_\_\_ If no, list directors below.  
Director \_\_\_\_\_  
Director \_\_\_\_\_

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:  
NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ \_\_\_\_\_ (Money received for issued shares)  
The report must be signed by the chairman of the board of directors, its president, or any other officer in the presence of a notary public.  
Dated 3-10-03 By [Signature]  
(Signature)  
Its President  
(Title)

STATE OF South Dakota ss  
COUNTY OF Brown  
On this the 10 day of MARCH 2003, before me, Marilyn Littrell  
personally appeared John Braun, known to me, or proved to me,  
to be the President of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.  
My Commission Expires 8-30-2007  
[Signature]  
Notary Public

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

**FILING FEE: \$10 in addition to annual report fee**

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_
2. The previous street address, or a statement that there is no street address, of its registered office \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor registered agent is \* \_\_\_\_\_  
\*The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated \_\_\_\_\_  
\_\_\_\_\_  
(Signature)  
\_\_\_\_\_  
(Title)

STATE OF \_\_\_\_\_ ss  
COUNTY OF \_\_\_\_\_

On this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_  
personally appeared \_\_\_\_\_, known to me, or proved to me,  
to be the \_\_\_\_\_ of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.

My Commission Expires \_\_\_\_\_  
\_\_\_\_\_  
Notary Public

(Notarial Seal)

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, \_\_\_\_\_, hereby give my consent to serve as the  
(name of registered agent)  
registered agent for \_\_\_\_\_  
(corporate name)

Dated \_\_\_\_\_  
\_\_\_\_\_  
(signature)

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL AVE.  
PIERRE, S.D. 57501  
(605)773-4845  
Fax (605)773-4550

**ANNUAL FARM REPORT**  
PLEASE TYPE OR USE BLOCK LETTERS  
Filed pursuant to the provisions of S.D.A.C. 2453  
S.D.A.C. 2453  
S.D.A.C. 2453

NO FILING FEE

FILE DATE RECEIVED

MAR 27 '03

S.D. SEC. OF STATE

1. Corporate name and address:



DF-035676 APR/2002

JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER SD 57479-0048

FILING DATE: Due during the month the domestic Certificate of Incorporation or the foreign Certificate of Authority was issued, and delinquent the last day of the following month.

2. The state of incorporation is South DAKOTA
3. The name of the registered agent in South Dakota and the registered office address is John BRAUN  
P.O. Box 48 WARNER south DAKOTA
4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

6. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
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9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 100 %.  
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 3-10-03

John Braun  
(Signature)

STATE OF South Dakota  
COUNTY OF Brown

President  
(Title)

On this the 10 day of MARCH, 2003, before me, Marilyn Littrell  
personally appeared John BRAUN, known to me, or proved to me,  
to be the President of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.

8-30-2004  
My Commission Expires

Marilyn Littrell  
(Notary Public)

(Notarial Seal)





**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

**FILING FEE: \$10 In addition to annual report fee**

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_
2. The previous street address, or a statement that there is no street address, of its registered office \_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor registered agent is \* \_\_\_\_\_  
\*The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated \_\_\_\_\_ (Signature) \_\_\_\_\_  
(Title) \_\_\_\_\_

STATE OF \_\_\_\_\_ ss  
COUNTY OF \_\_\_\_\_

On this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_  
personally appeared \_\_\_\_\_, known to me, or proved to me,  
to be the \_\_\_\_\_ of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.

My Commission Expires \_\_\_\_\_  
Notary Public  
(Notarial Seal)

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, \_\_\_\_\_, hereby give my consent to serve as the  
(name of registered agent)  
registered agent for \_\_\_\_\_  
(corporate name)  
Dated \_\_\_\_\_ (signature) \_\_\_\_\_

# ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK  
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 04/01/04  
1303926  
RECEIVED  
MAR 23 '04

226 4947

1. Corporate name and address:



\* D F 0 3 5 6 7 6 \*  
DF035676 APR/2003  
JSL BRAUN, INC.  
BRAUN, JOHN  
~~MAIN ST 3 W. Main St.~~  
PO BOX 48  
WARNER SD 57479-0048

FILING DATE: Due during the month the domestic Certificate of Incorporation or the foreign Certificate of Authority was issued, and delinquent the last day of the following month.

2. The state of incorporation is South DAKOTA

3. The name of the registered agent in South Dakota and the registered office address is  
John BRAUN POBox 48 WARNER S.D 57479

4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

6. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
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9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 10 %.  
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 3-18-04

STATE OF South DAKOTA  
COUNTY OF Brown

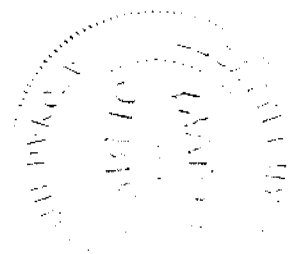
[Signature]  
(Signature)  
President  
(Title)

On this the 18 day of MARCH, 2004, before me, MARILYN LITRELL, known to me, or proved to me, to be the President of the corporation that is described in and that executed the within instrument and acknowledged to me that such corporation executed the same.

8-30-2004  
My Commission Expires

Marilyn Littrell  
(Notary Public)

(Notarial Seal)



SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL AVE.  
PIERRE, S.D. 57501  
(605)773-4845  
Fax (605)773-4550

# ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK  
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 04/01/05

RECEIVED

MAR 23 '05

S.D. SEC. OF STATE

235 0476

1. Corporate name and address:



DF035676 APR/2004  
JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER SD 57479-0048

FILING DATE: Due during the month the domestic Certificate of Incorporation or the foreign Certificate of Authority was issued, and delinquent the last day of the following month.

2. The state of incorporation is SOUTH DAKOTA

3. The name of the registered agent in South Dakota and the registered office address is John Braun  
PO Box 48 Warner, SD 57479

4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

6. List only the changes of the names or addresses of the officers and directors.

NAME REPLACED AS OFFICER OR DIRECTOR

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is farming. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

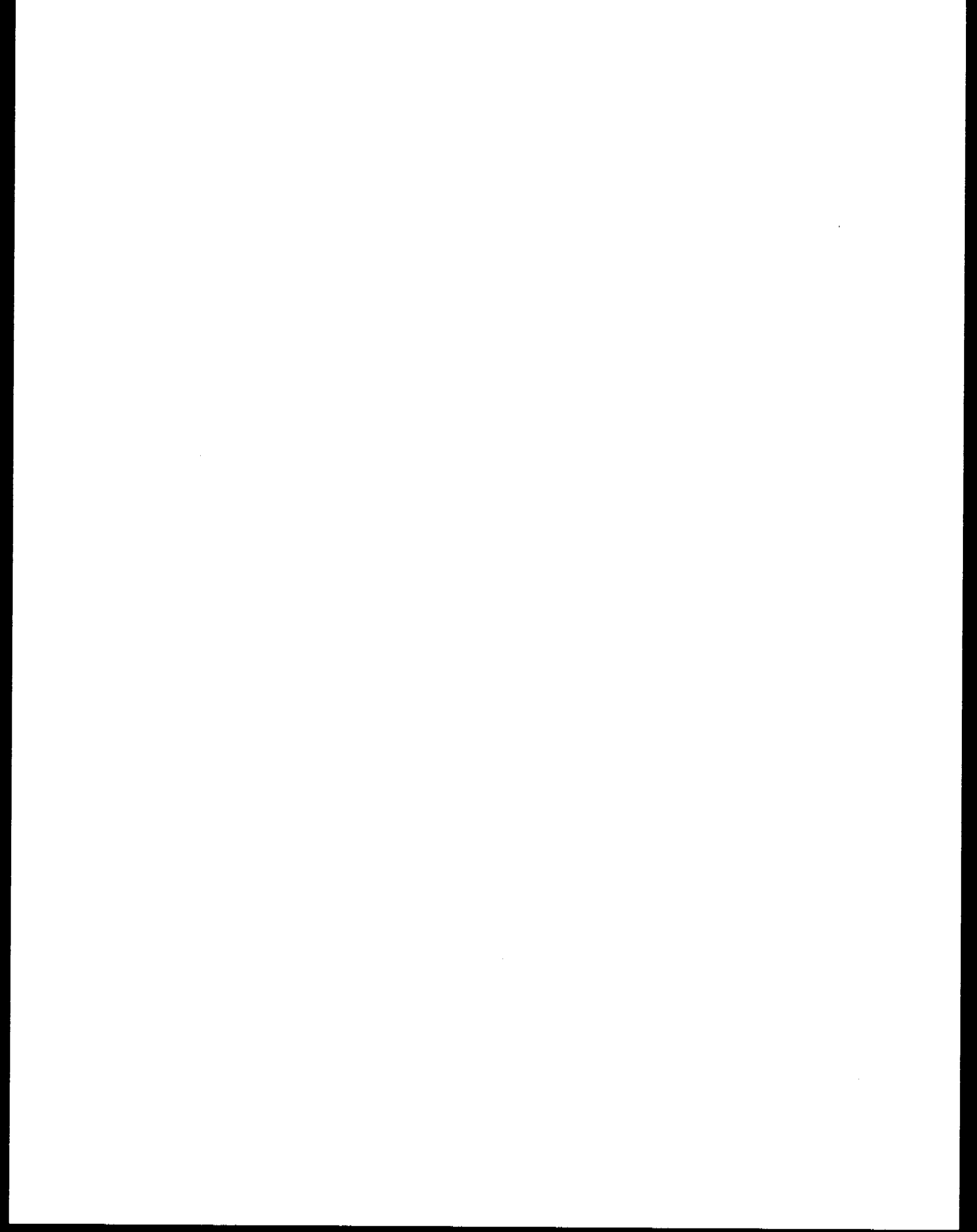
NAME ADDRESS NUMBER OF SHARES DEGREE OF KINDRED

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 100 %.  
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 3-18-05

John Braun  
(Signature)

President  
(Title)





**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

**FILING FEE: \$10 In addition to annual report fee**

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_
2. The previous street address, or a statement that there is no street address, of its registered office \_\_\_\_\_  
\_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor registered agent is \* \_\_\_\_\_

**\*The Consent of Registered Agent below must be completed by the new agent.**

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or any other officer.

Dated \_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, \_\_\_\_\_, hereby give my consent to serve as the  
(name of registered agent)

registered agent for \_\_\_\_\_  
(corporate name)

Dated \_\_\_\_\_

\_\_\_\_\_  
(signature)

2006

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$30 MAKE CHECK PAYABLE TO SECRETARY OF STATE

FILE DATE 03/16/06
RECEIPT NO. 1540524
RECEIVED
MAR 16 '06
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Registered Address:



DF035676 APR/2005
JSL BRAUN, INC.
BRAUN, JOHN
MAIN ST
PO BOX 48
WARNER SD 57479-0048

Telephone # 605-225-4892
FAX # 605-229-4091

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

ATTENTION - FILING INSTRUCTIONS

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

\*\*\*\*\*

2. The address of the principal office 3W MAIN Street WARNER SD 57479

3. The names and business addresses of its directors and principal officers:

Table with columns: NAME, OFFICE, STREET ADDRESS, CITY, STATE, ZIP+4. Rows include John BRAUN (President), Stacy TUSZKA (Secretary), and Lori Stouten (Treasurer).

SD law requires at least one director.

Do the above listed officers serve also as directors? YES X NO

Director lines for listing additional directors

4. Provide a brief description of the nature of the business Rent Land out - some fat cattle

5. The total number of authorized shares, itemized by class and series, if any, within each class:

Table with columns: NUMBER OF AUTHORIZED SHARES, CLASS, SERIES. Row: 1,000,000, Common

Table with columns: NUMBER OF ISSUED SHARES, CLASS, SERIES. Row: 300,000, Common

The statement may be signed by any authorized officer of the Corporation.

Dated 3-10-06

Signature of John Braun

Printed Name John BRAUN

Title President

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

**FILING FEE: \$10 In addition to annual report fee**

Pursuant to the provisions of the South Dakota Business Corporation Act, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_
2. The street address, or a statement that there is no street address, of its current registered office \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
3. The new address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address, if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
4. The name of its current registered agent is \_\_\_\_\_
5. The name of its new registered agent is \* \_\_\_\_\_

**\*The Consent of Registered Agent below must be completed by the new agent.**

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

The statement may be signed by any authorized officer of the corporation.

Dated \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, \_\_\_\_\_, hereby give my consent to serve as the  
(name of registered agent)

registered agent for \_\_\_\_\_  
(corporate name)

Dated \_\_\_\_\_

\_\_\_\_\_  
(signature)

247 1726 04/05/2006  
SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL AVE.  
PIERRE, S.D. 57501  
(605)773-4845  
Fax (605)773-4550

# ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK  
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 03/16/06

RECEIVED

MAR 16 '06

S.D. SEC. OF STATE

1. Corporate name and address:



DF035676 APR/2005  
JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER SD 57479-0048

FILING DATE: Due during the month the domestic Certificate of Incorporation or the foreign Certificate of Authority was issued, and delinquent the last day of the following month.

2. The state of incorporation is South Dakota

3. The name of the registered agent in South Dakota and the registered office address is John Braun  
3W MAIN street WARNER S.D. 57479

4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.  
NE 1/4 35-122-63 SW 1/4 11-121-63

6. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 33 %.  
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 3-10-06

[Signature]  
(Signature)

President  
(Title)





**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

**FILING FEE: \$10 In addition to annual report fee**

Pursuant to the provisions of the South Dakota Business Corporation Act, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_
2. The street address, or a statement that there is no street address, of its current registered office \_\_\_\_\_  
\_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
3. The new address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address, if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
4. The name of its current registered agent is \_\_\_\_\_
5. The name of its new registered agent is \* \_\_\_\_\_

**\*The Consent of Registered Agent below must be completed by the new agent.**

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

The statement may be signed by any authorized officer of the corporation.

Dated \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, \_\_\_\_\_, hereby give my consent to serve as the  
(name of registered agent)

registered agent for \_\_\_\_\_  
(corporate name)

Dated \_\_\_\_\_

\_\_\_\_\_  
(signature)

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL AVE.  
PIERRE, S.D. 57501  
(605)773-4845  
Fax (605)773-4550

# ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK  
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 05/29/07

RECEIVED

MAY 29 2007

S.D. SEC. OF STATE

1. Corporate name and address:



DF035676 APR/2006

JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER SD 57479-0048

FILING DATE: Due during the month the domestic Certificate of Incorporation or the foreign Certificate of Authority was issued, and delinquent the last day of the following month.

2. The state of incorporation is South Dakota

3. The name of the registered agent in South Dakota and the registered office address is John Braun  
PO Box 48 Warner South Dakota 57479

4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

6. List only the changes of the names or addresses of the officers and directors.

NAME

REPLACED

AS OFFICER OR DIRECTOR

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

NAME

ADDRESS

NUMBER OF SHARES

DEGREE OF KINDRED

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is \_\_\_\_\_%.  
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 5-8-07

  
(Signature)

President  
(Title)

262 3110



2008

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$30 MAKE CHECK PAYABLE TO SECRETARY OF STATE

FILE DATE 04/01/08
RECEIPT NO. 1782064
RECEIVED
MAR 27 2008
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Registered Address:



DF035676 APR/2007
JSL BRAUN, INC.
BRAUN, JOHN
MAIN ST
PO BOX 48
WARNER SD 57479-0048

Telephone # 605-225-4897
FAX #

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

ATTENTION - FILING INSTRUCTIONS

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The address of the principal office

Table with 5 columns: NAME, OFFICE, STREET ADDRESS, CITY, STATE, ZIP+4. Rows for President, Vice President, Secretary, Treasurer.

SD law requires at least one director. Do the above listed officers serve also as directors? YES NO If no, list directors below.

Director
Director

4. Provide a brief description of the nature of the business

5. The total number of authorized shares, itemized by class and series, if any, within each class:
NUMBER OF AUTHORIZED SHARES CLASS SERIES

6. NUMBER OF ISSUED SHARES CLASS SERIES

The statement may be signed by any authorized officer of the Corporation.

Dated 3-20-08

Signature: John Braun

Printed Name: John BRAUN

Title: President

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH**

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

**FILING FEE: \$10 In addition to annual report fee**

Pursuant to the provisions of the South Dakota Business Corporation Act, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is \_\_\_\_\_
2. The street address, or a statement that there is no street address, of its current registered office \_\_\_\_\_  
\_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
3. The new address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address, if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_  
ZIP + 4 \_\_\_\_\_
4. The name of its current registered agent is \_\_\_\_\_
5. The name of its new registered agent is \* \_\_\_\_\_

**\*The Consent of Registered Agent below must be completed by the new agent.**

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

The statement may be signed by any authorized officer of the corporation.

Dated \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, \_\_\_\_\_, hereby give my consent to serve as the  
(name of registered agent)

registered agent for \_\_\_\_\_  
(corporate name)

Dated \_\_\_\_\_

\_\_\_\_\_  
(signature)

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL AVE.  
PIERRE, S.D. 57501  
(605)773-4845  
Fax (605)773-4550

# ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK  
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 04/01/08

RECEIVED

MAR 27 2008

S.D. SEC. OF STATE

274 2891

1. Corporate name and address:



\* D F 0 3 5 6 7 6 \*  
DF035676 APR/2007  
JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER SD 57479-0048

FILING DATE: Due during the month the domestic Certificate of Incorporation or the foreign Certificate of Authority was issued, and delinquent the last day of the following month.

2. The state of incorporation is South Dakota

3. The name of the registered agent in South Dakota and the registered office address is John Braun  
PO Box 48 Warner, South Dakota 57479

4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

6. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 100,000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

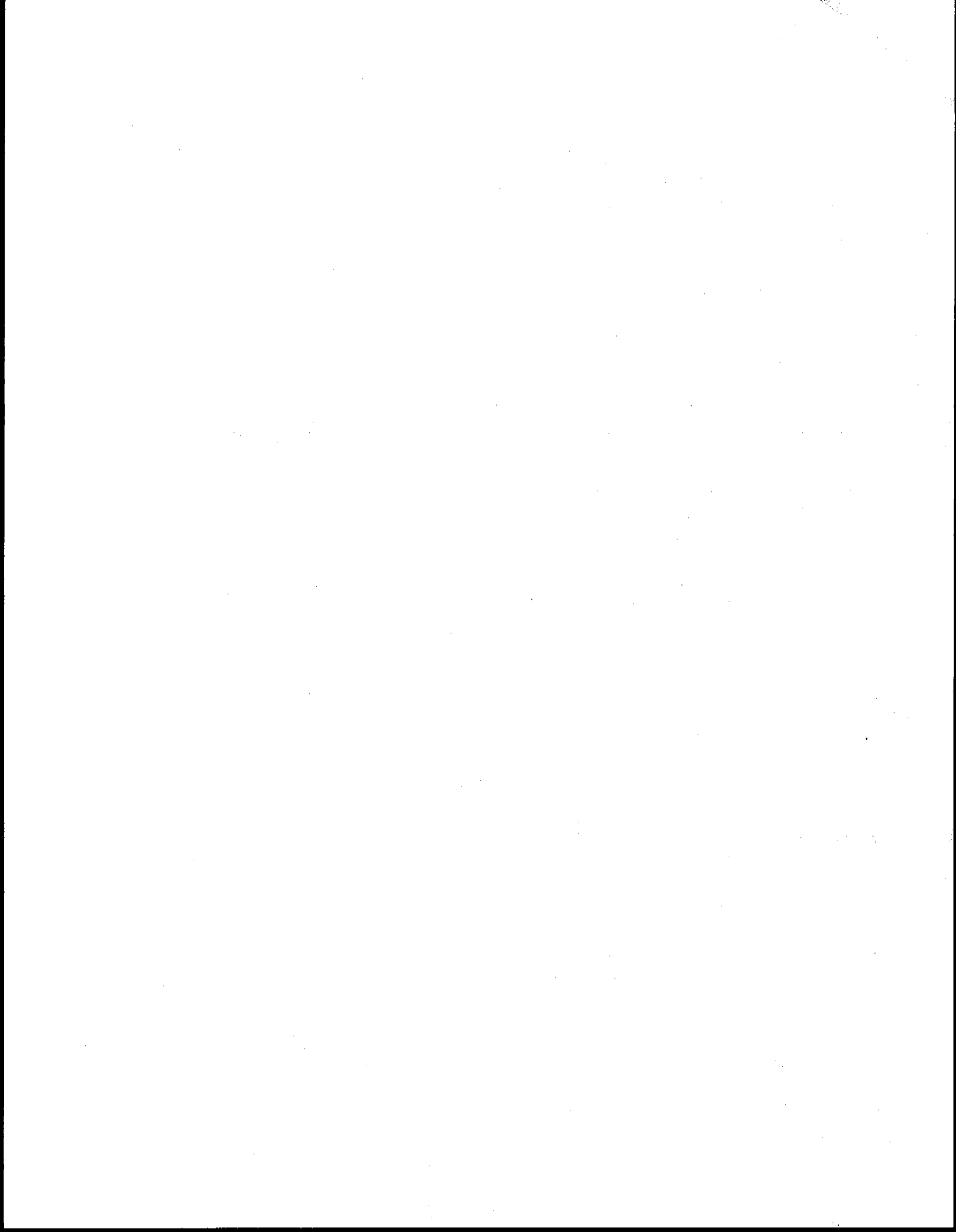
NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is \_\_\_\_\_ %.  
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 3-20-08

x John Braun  
(Signature)

President  
(Title)



291 3746 06/17/2009

2009

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

ANNUAL REPORT  
DOMESTIC

Please Type or Print Clearly in Ink

FILING FEE: \$30 Make check payable to SECRETARY OF STATE

FILE DATE 05/28/09  
RECEIPT NO 19193309

RECEIVED  
MAY 28 2009

RECEIVED  
APR 23 2009

S.D. SEC. OF STATE

S.D. SEC. OF STATE

Telephone # 605-225-4897

FAX #

FILING DATE: Due during the month  
the Certificate of Incorporation was  
issued, and delinquent after the last  
day of the following month.

1. Corporate Name, Registered Agent Name and Address:



DF035676 APR/2008  
JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER SD 57479-0048

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

3 W MAIN PO BOX 48 WARNER S.D. 57479  
Street Address City State ZIP+4

Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent JOHN BRAUN

3 W MAIN Warner SD 57479-0048  
Street Address (Required to be a South Dakota Address) City State ZIP+4

P.O. Box 48 WARNER SD 57479-0048  
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

4. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

JOHN BRAUN 3 W MAIN WARNER SD 57479-0048  
President Street Address City State ZIP+4

Vice President Street Address City State ZIP+4

STACY TUSZKA 14259 382<sup>th</sup> AVENUE WARNER SD 57479-0045  
Secretary Street Address City State ZIP+4

LORI STOUTEN 6285 Coyote Trail LINOLAKES MN 55014 ?  
Treasurer Street Address City State ZIP+4

Director Street Address City State ZIP+4

Director Street Address City State ZIP+4

Dated 4-22-09

(Signature of an authorized officer)

John Braun  
(Printed Name)

President  
(Title)

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 \_\_\_\_\_

The name of the successor 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

MAIN Street WARNER S.D. 57479-0048  
Street Address (Required) City State ZIP+4

P.O. Box 48 WARNER S.D. 57479-0048  
Mailing Address (Optional) City State ZIP+4

5. If the address has changed, its new address

3W MAIN Street WARNER S.D. 57479-0048  
Street Address (Required to be a South Dakota Address) City State ZIP+4

SAME P.O. Box 48 WARNER S.D. 57479-0048  
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

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

Dated 5-18-09

\_\_\_\_\_  
(Signature of an authorized officer)

John BRAUN  
(Printed Name)

President  
(Title)

291 3747 06/17/2009

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

# ANNUAL FARM REPORT Corporation

Please Type or Print Clearly in Ink  
No Filing Fee

FILE DATE	<u>05/28/09</u>
RECEIPT NO	
<b>RECEIVED</b>	
<b>APR 23 2009</b>	
<b>S.D. SEC. OF STATE</b>	
Telephone #	<u>605-225-4897</u>
FAX #	<u>605-229-4091</u>
FILING DATE: To be filed with the Annual Report.	

**RECEIVED**  
**MAY 28 2009**  
**S.D. SEC. OF STATE**

1. Corporate ID, Name and Address:



DF035676 APR/2008  
JSL BRAUN, INC.  
BRAUN, JOHN  
MAIN ST  
PO BOX 48  
WARNER SD 57479-0048

2. The name of the South Dakota Registered Agent John BRAUN

3 W MAIN WARNER SD 57479-0048  
Street Address (Required to be a South Dakota Address) City State ZIP+4

PO Box 48 WARNER SD 57479-0048  
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

3. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

County	Section	Township	Acres
<u>Mcpherson 69</u>	<u>5</u>	<u>127N</u>	<u>466.8</u>
County	Section	Township	Acres
County	Section	Township	Acres

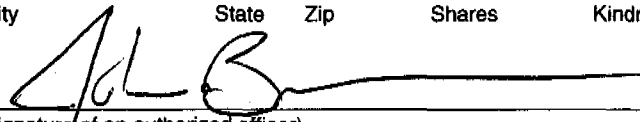
4. Please complete the appropriate section:

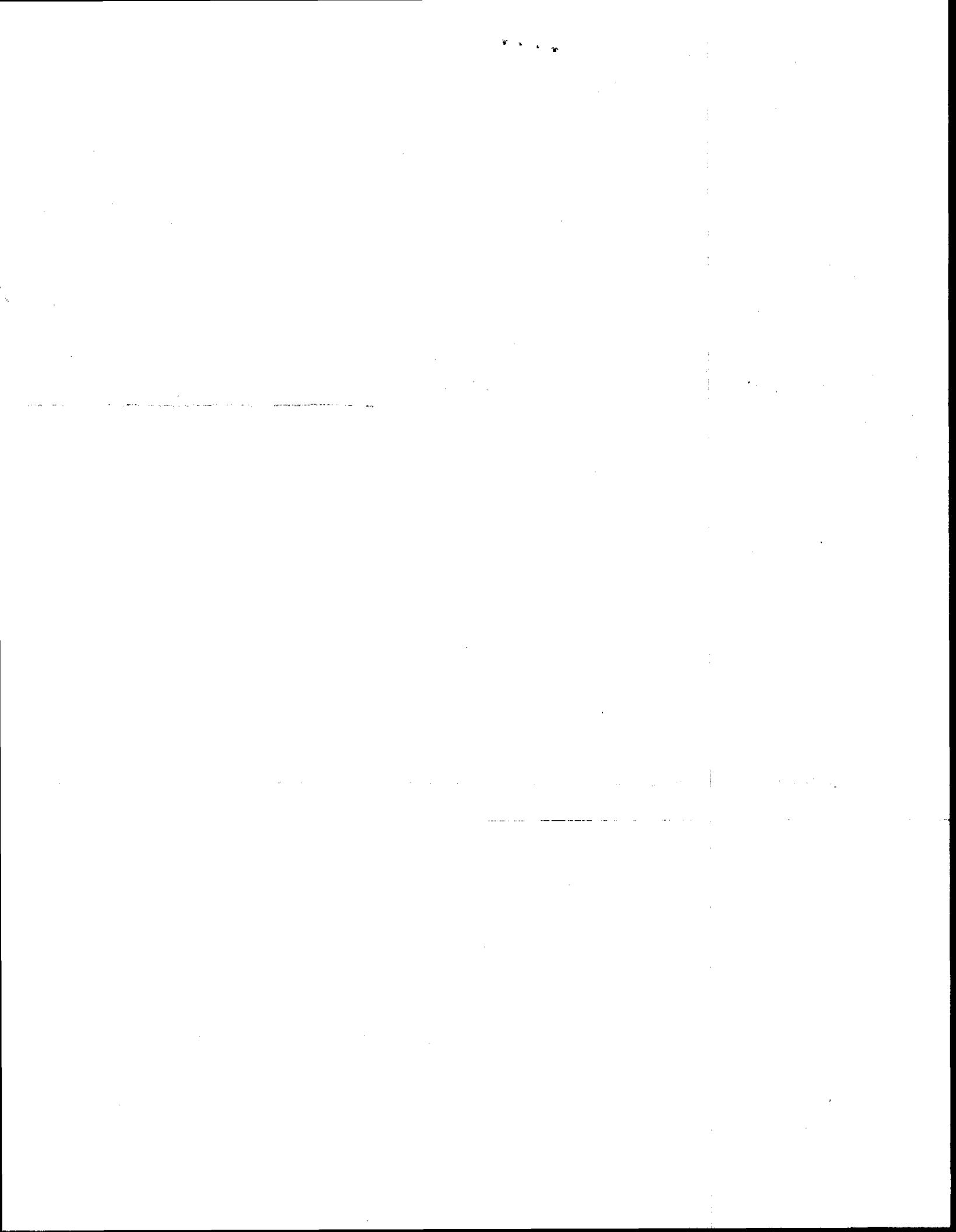
<b>Family Farm Corporation</b>	The <b>NUMBER OF SHARES</b> owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity.	<u>100,000</u>
<b>Authorized Farm Corporation</b>	The <b>PERCENTAGE</b> of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	<u>100</u> %

5. List any changes to shareholder name, address, number of shares owned, and degree of kindred.

Name	Address	City	State	Zip	Shares	Kindred
Name	Address	City	State	Zip	Shares	Kindred
Name	Address	City	State	Zip	Shares	Kindred

Dated 4-22-09

  
(Signature of an authorized officer)  
John BRAUN  
(Printed Name)  
President  
(Title)



2010

ANNUAL REPORT DOMESTIC

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 4-13-10

RECEIPT NO 20201139

RECEIVED

APR 13 2010

S.D. SEC. OF STATE

Telephone # 605-225-4897

FAX # 605-229-4091

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

1. Corporate Name, Registered Agent Name and Address:



DF035676 APR/2009
JSL BRAUN, INC.
BRAUN, JOHN
PO BOX 48
WARNER SD 57479-0048

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

3 W MAIN PO Box 48 WARNER
Street Address City State ZIP+4
Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent John BRAUN

3 West MAIN WARNER S.D 57479-0048
Street Address (Required to be a South Dakota Address) City State ZIP+4
P.O. Box 48 WARNER S.D 57479-0048
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

4. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

- John BRAUN 3 W MAIN WARNER SD 57479-0048
President Street Address City State ZIP+4
Stacy TUSZKA 14259 387th AVENUE WARNER SD 57479-0045
Secretary Street Address City State ZIP+4
Lori Stouten 6225 Coyote Trail LIND LAKE MN 55014
Treasurer Street Address City State ZIP+4
Director Street Address City State ZIP+4
Director Street Address City State ZIP+4

Dated 4-12-10

John Bra...
(Signature of an authorized officer)
John BRAUN
(Printed Name)
President
(Title)

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 \_\_\_\_\_

The name of the successor 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

Street Address (Required)	City	State	ZIP+4
---------------------------	------	-------	-------

Mailing Address (Optional)	City	State	ZIP+4
----------------------------	------	-------	-------

5. If the address has changed, its new address

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
--	------	-------	-------

Mailing Address (Optional – Required to be a South Dakota Address)	City	State	ZIP+4
--	------	-------	-------

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

Dated \_\_\_\_\_

\_\_\_\_\_  
(Signature of an authorized officer)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Title)

304 2643 04/22/2010

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

# ANNUAL FARM REPORT Corporation

Please Type or Print Clearly in Ink  
No Filing Fee

FILE DATE	<u>4-13-10</u>
RECEIPT NO	_____
<b>RECEIVED</b>	
<b>APR 13 2010</b>	
<b>S.D. SEC. OF STATE</b>	

1. Corporate ID, Name and Address:



\* D F 0 3 5 6 7 6 \*  
DF035676 APR/2009  
JSL BRAUN, INC.  
BRAUN, JOHN  
PO BOX 48  
WARNER SD 57479-0048

Telephone #	<u>605-225-4297</u>
FAX #	_____
FILING DATE:	To be filed with the Annual Report.

2. The name of the South Dakota Registered Agent John BRAUN

3 West WARNER SD 57479-0048  
Street Address (Required to be a South Dakota Address) City State ZIP+4

P.O. Box 48 WARNER SD 57479-0048  
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

3. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

County	Section	Township	Acres

4. Please complete the appropriate section:

<b>Family Farm Corporation</b>	The <b>NUMBER OF SHARES</b> owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity.	<u>100,000</u>
<b>Authorized Farm Corporation</b>	The <b>PERCENTAGE</b> of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	<u>100</u> %

5. List any changes to shareholder name, address, number of shares owned, and degree of kindred.

Name	Address	City	State	Zip	Shares	Kindred

Dated 4-12-2010

John Braun  
(Signature of an authorized officer)  
John BRAUN  
(Printed Name)  
President  
(Title)

2011-12-15

2011-12-15

2011-12-15

2011-12-15

2011-12-15

2011-12-15

2011-12-15

2011-12-15

2011-12-15

318 1574 04/26/2011

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

# ANNUAL FARM REPORT Corporation

Please Type or Print Clearly in Ink  
No Filing Fee

FILE DATE <u>04-02-2011</u>
RECEIPT NO <u>2135729</u>
<b>RECEIVED</b>
<b>APR 01 2011</b>
<b>S.D. SEC. OF STATE</b>
Telephone # _____

1. Corporate ID, Name and Address:



\*DF035676\*  
DF035676 APR/2010  
JSL BRAUN, INC.  
BRAUN, JOHN  
PO BOX 48  
WARNER SD 57479-0048

2. The name of the South Dakota Registered Agent John Braun

3 West Main Street Warner SD 57479-0048  
Street Address or Rural Route Box Number in This State and City State ZIP+4

PO Box 48 Warner SD 57479-0048  
Mailing Address in This State, if Different from Street Address City State ZIP+4

Email \_\_\_\_\_

3. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

County Section Township Acres

County Section Township Acres

County Section Township Acres

4. Please complete the appropriate section:

<b>Family Farm Corporation</b>	The <b>NUMBER OF SHARES</b> owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	<u>100,000</u>
<b>Authorized Farm Corporation</b>	The <b>PERCENTAGE</b> of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	<u>100</u> %

5. List any changes to shareholder name, address, number of shares owned, and degree of kindred (DOK).

Name	Address	City	State	Zip+4	Shares	DOK

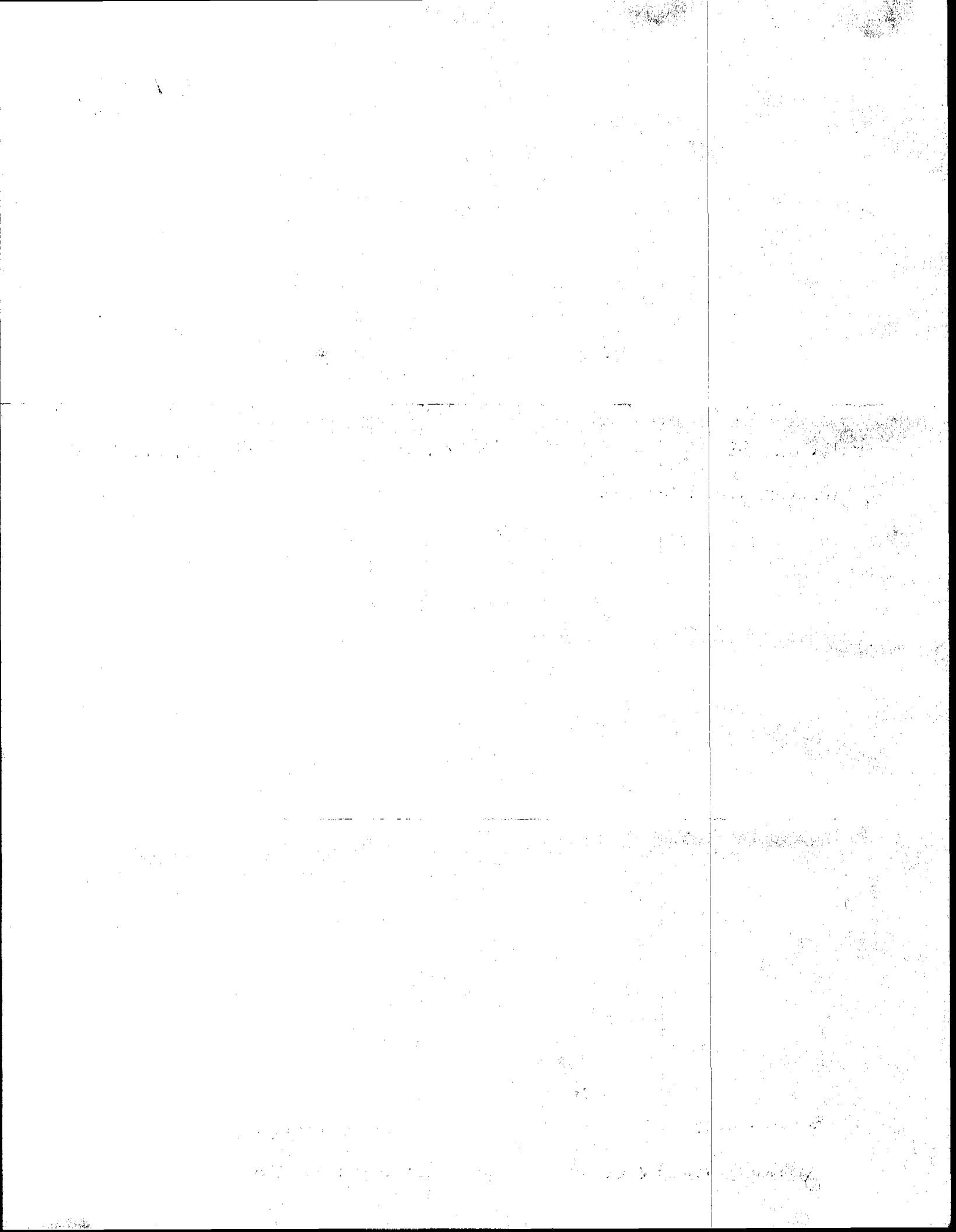
No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated 3-30-2011

Stacy Tuszka  
(Signature of an Authorized Person)

Stacy Tuszka  
(Printed Name)

Email \_\_\_\_\_



2011

ANNUAL REPORT DOMESTIC

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 04.01.2011
RECEIPT NO 2135729
RECEIVED
APR 01 2011
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DF035676 APR/2010
JSL BRAUN, INC.
BRAUN, JOHN
PO BOX 48
WARNER SD 57479-0048

Telephone #

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.

3 West Main Street Warner SD 57479-0048
PO Box 48 Warner SD 57479-0048

4. The name of the South Dakota Registered Agent John Braun

3 West Main Street Warner SD 57479-0048
PO Box 48 Warner SD 57479-0048

5. The names and addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

- John Braun 3 W. Main St. Warner SD 57479-0048
Stacy Tuszka 3 W. Main St. Warner SD 57479-0048
Lori Stouten 3 W. Main St. Warner SD 57479-0048

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

Dated 3-30-2011

Stacy Tuszka
(Signature of an Authorized Person)

Email

Stacy Tuszka
(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

## ANNUAL FARM REPORT

FILE DATE 03/29/2012

Secretary of State Office

500 E Capitol Ave

Pierre, SD 57501

(605)773-4845

## Corporation

**FILING FEE: \$50.00** Please Type or Print Clearly In Ink  
 Make check payable to SECRETARY OF STATE

RECEIPT NO 32493

## 1. Corporate Name and Address:

DF035676  
 JSL BRAUN, INC.  
 3 WEST MAIN STREET  
 WARNER, SD 57479-0048

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

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

3 WEST MAIN STREET	WARNER	SD	57479-0048
Street Address	City	State	ZIP+4
PO BOX 48	WARNER	SD	57479-0048
Mailing Address	City	State	ZIP+4

## 4. The name of the South Dakota Registered Agent

Agent Name: JOHN BRAUN

3 W MAIN STREET	WARNER	SD	57479
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 48	WARNER	SD	57479-0048
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. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	JOHN G BRAUN	PO BOX 48	WARNER	SD	57479
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	STACY K TUSZKA	PO BOX 48	WARNER	SD	57479
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LORI A STOUTEN	PO BOX 48	WARNER	SD	57479
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

## 6. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

County	Section	Tow nship	Acres
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## 7. Please complete the appropriate section:

<b>Family Farm Corporation</b>	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	100,000.00
<b>Authorized Farm Corporation</b>	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

## 8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Street Address	City	State	ZIP+4	Shares	DOK
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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

Signature Accepted Electronically \_\_\_\_\_  
(Signature of an Authorized Person)

STACY K TUSZKA \_\_\_\_\_  
(Printed Name)

2013

Enter Filing Year

## ANNUAL FARM REPORT

FILE 4/5/2013

RECEIPT NO 108254

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

## Corporation

Please Type or Print Clearly In Ink

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

## 1. Corporate Name and Address:

DF035676  
JSL BRAUN, INC.  
3 W MAIN  
WARNER, SD 57479

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

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

3 W MAIN	WARNER	SD	57479
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Street Address	City	State	ZIP+4
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PO BOX 48	WARNER	SD	57479
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Mailing Address	City	State	ZIP+4
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## 4. The name of the South Dakota Registered Agent

Agent Name: JOHN BRAUN

3 W MAIN STREET	WARNER	SD	57479
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Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
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PO BOX 48	WARNER	SD	57479-0048
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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. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	JOHN G BRAUN	PO BOX 48	WARNER	SD	57479
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President	Street Address	City	State	ZIP+4
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Vice President	Street Address	City	State	ZIP+4
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<input checked="" type="checkbox"/>	STACY K TUSZKA	PO BOX 48	WARNER	SD	57479
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Secretary	Street Address	City	State	ZIP+4
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<input checked="" type="checkbox"/>	LORI A STOUTEN	PO BOX 48	WARNER	SD	57479
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Treasurer	Street Address	City	State	ZIP+4
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Director	Street Address	City	State	ZIP+4
----------	----------------	------	-------	-------

Director	Street Address	City	State	ZIP+4
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## 6. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

7. Please complete the appropriate section:

<b>Family Farm Corporation</b>	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	100000
<b>Authorized Farm</b>	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Street Address	City	State	ZIP+4	Shares
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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.

Date

Signature Accepted Electronically

(Signature of an Authorized Person)

STACY K TUSZKA

(Printed Name)

2014

Enter Filing Year

## ANNUAL FARM REPORT

FILE 4/4/2014

RECEIPT NO 190414

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

## Corporation

Please Type or Print Clearly In Ink

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

## 1. Corporate Name and Address:

DF035676  
JSL BRAUN, INC.  
3 W MAIN  
WARNER, SD 57479

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

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

3 W MAIN	WARNER	SD	57479
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Street Address	City	State	ZIP+4
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PO BOX 48	WARNER	SD	57479
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Mailing Address	City	State	ZIP+4
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## 4. The name of the South Dakota Registered Agent

Agent Name: JOHN BRAUN

3 W MAIN STREET	WARNER	SD	57479
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Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
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PO BOX 48	WARNER	SD	57479-0048
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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. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	JOHN G BRAUN	PO BOX 48	WARNER	SD	57479
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President	Street Address	City	State	ZIP+4
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<input type="checkbox"/>					
Vice President	Street Address	City	State	ZIP+4	

<input checked="" type="checkbox"/>	STACY K TUSZKA	PO BOX 48	WARNER	SD	57479
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Secretary	Street Address	City	State	ZIP+4
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<input checked="" type="checkbox"/>	LORI A STOUTEN	PO BOX 48	WARNER	SD	57479
-------------------------------------	----------------	-----------	--------	----	-------

Treasurer	Street Address	City	State	ZIP+4
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<input type="checkbox"/>					
Director	Street Address	City	State	ZIP+4	

<input type="checkbox"/>					
Director	Street Address	City	State	ZIP+4	

## 6. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

7. Please complete the appropriate section:

<b>Family Farm Corporation</b>	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	100000
<b>Authorized Farm</b>	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Street Address	City	State	ZIP+4	Shares
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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.

Date

Signature Accepted Electronically

(Signature of an Authorized Person)

STACY TUSZKA

(Printed Name)

2015

Enter Filing Year

## ANNUAL FARM REPORT

FILE DATE 2/3/2015

RECEIPT NO 269001

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

## Corporation

Please Type or Print Clearly In Ink

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

## 1. Corporate Name and Address:

DF035676  
JSL BRAUN, INC.  
3 W MAIN  
WARNER, SD 57479

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

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

3 W MAIN	WARNER	SD	57479
Street Address	City	State	ZIP+4
PO BOX 48	WARNER	SD	57479
Mailing Address	City	State	ZIP+4

## 4. The name of the South Dakota Registered Agent

Agent Name: JOHN BRAUN

3 W MAIN STREET	WARNER	SD	57479
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 48	WARNER	SD	57479-0048
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. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	JOHN G BRAUN	PO BOX 48	WARNER	SD	57479
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	STACY K TUSZKA	PO BOX 48	WARNER	SD	57479
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LORI A STOUTEN	PO BOX 48	WARNER	SD	57479
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

## 6. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

7. Please complete the appropriate section:

<b>Family Farm Corporation</b>	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	100000
<b>Authorized Farm Corporation</b>	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Street Address	City	State	ZIP+4	Shares
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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 02/03/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

STACY K TUSZKA

(Printed Name)

2016

## ANNUAL FARM REPORT

FILE DATE 2/1/2016

Enter Filing Year

## Corporation

RECEIPT NO 376914

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

SDCL 47-27-18, 59-11-24

Please Type or Print Clearly In Ink

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

## 1. Corporate ID and Name:

DF035676

Enter Corporate ID

JSL BRAUN, INC.

Enter Corporate Name

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

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

3 W MAIN	WARNER	SD	57479
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Actual Street Address or Rural Route Box Number	City	State	ZIP+4
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PO BOX 48	WARNER	SD	57479
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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: JOHN BRAUN

3 W MAIN STREET	WARNER	SD	57479
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Actual Street Address or Rural Route Box Number in This State	City	State	ZIP+4
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PO BOX 48	WARNER	SD	57479-0048
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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. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	JOHN G BRAUN	PO BOX 48	WARNER	SD	57479
	President	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>					
	Vice President	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	STACY K TUSZKA	PO BOX 48	WARNER	SD	57479
	Secretary	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	LORI A STOUTEN	PO BOX 48	WARNER	SD	57479
	Treasurer	Actual Street Address	City	State	ZIP+4

Director Actual Street Address City State ZIP+4

Director Actual Street Address City State ZIP+4

6. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

7. Please complete the appropriate section:

<b>Family Farm Corporation</b>	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	100000
<b>Authorized Farm Corporation</b>	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name Actual Street Address City State ZIP+4 Shares

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 02/01/2016

Signature Accepted Electronically

(Signature of an Authorized Person)

STACY K TUSZKA

(Printed Name)