

377 5650

Receipt Number: 2070821

File Number **DL022516**



ARTICLES_OF_ORGANIZATION

For

JHLJ, L.L.C.

Filed at the request of:

THOMAS H FRIEBERG
FRIEBERG NELSON & ASK LLP
PO BOX 511
BERESFORD SD 57004

*State of South Dakota
Office of the Secretary of State*

Filed in the office of the Secretary of State on: **Thursday, September 30, 2010**



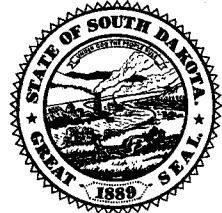
Secretary of State

Fee Received: \$150.00

377 5651

098 8305 ©

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

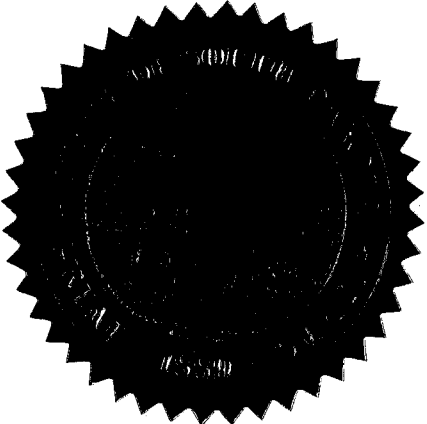
Certificate of Organization Limited Liability Company

ORGANIZATIONAL ID #: DL022516

I, Chris Nelson, Secretary of State of the State of South Dakota, hereby certify that the Articles of Organization of **JHLJ, L.L.C.** duly signed and verified, pursuant to the provisions of the South Dakota Limited Liability Company Act, have been received in this office and are found to conform to law.

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

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this September 30, 2010.



Chris Nelson
Chris Nelson
Secretary of State

UNIVERSITY

377 5652 10/01/2010

Filed this 30th day of Sept, 2010
Chris Nelson
SECRETARY OF STATE

RECEIVED
SEP 30 2010
S.D. SEC. OF STATE

ARTICLES OF ORGANIZATION
OF
JHLJ, L.L.C.

The undersigned, one or more persons, hereby form a domestic limited liability company under SDCL Chapter 47-34A, and adopt the following Articles of Organization:

ARTICLE ONE
NAME

The name of the Limited Liability Company is JHLJ, L.L.C.

ARTICLE TWO
DURATION

The period of its duration shall be perpetual from the date of the filing of these Articles of Organization with the Secretary of the State of South Dakota.

ARTICLE THREE
PURPOSE

The purpose for which the Limited Liability Company is organized is to own and develop real estate, and to transact any and all lawful business for which limited liability companies may be organized.

ARTICLE FOUR
ADDRESS OF DESIGNATED OFFICE, PRINCIPAL PLACE OF BUSINESS,
AND NAME OF REGISTERED AGENT

The address of the initial designated office of the Limited Liability Company is 1009 Locust, Beresford, South Dakota, 57004. The principal place of business of the Limited Liability Company is 1009 Locust, Beresford, South Dakota, 57004.

The initial agent and registered agent of the Limited Liability Company is Thomas H. Frieberg of 115 N. 3rd Street, P.O. Box 511, Beresford, South Dakota, 57004.

ARTICLE FIVE
ORGANIZER

The name and address of the organizer are:

Thomas H. Frieberg
115 N. 3rd Street
P.O. Box 511
Beresford, SD 57004

377 5653

ARTICLE SIX
MEMBERS

The name and address of each member are:

Jeff Olson
1009 Locust
Beresford, SD 57004

Heidi Olson
1009 Locust
Beresford, SD 57004

Larry Olson
703 SW 13th Street
Beresford, SD 57004

Jennifer Olson
703 SW 13th Street
Beresford, SD 57004

ARTICLE SEVEN
MANAGEMENT

This company shall be managed by its members.

ARTICLE EIGHT
INDEMNIFICATION

To the fullest extent permitted by the South Dakota Limited Liability Company Act as the same exists or may hereafter be amended, the Company shall indemnify, defend and hold harmless any and all of its existing and former members, managers, directors, advisory directors, officers, employees and agents from and against any and all losses, claims, damages, expenses, fees or liabilities, whether joint or several, incurred by each of them, including but not limited to all legal fees, judgments, penalties or amounts paid in defense settlement or compromise, all of which may arise or be incurred, rendered or levied in any legal action or administrative proceeding brought or threatened against any of them by reason of the fact that such person is or was a manager, member, or agent of the Company.

ARTICLE NINE
LIABILITY TO COMPANY

No member, manager, director, or officer of JHLJ, L.L.C. shall be personally liable to JHLJ, L.L.C. or its members for monetary damages for breach of fiduciary duty by such member, manager, director, or officer as a member, manager, director, or officer, provided, however, that

this Article shall not eliminate or limit the liability of a member, manager, director, or officer to the extent provided by applicable law (i) for any breach of the member's, manager's, director's, or officer's duty of loyalty to JHLJ, L.L.C. or its members, (ii) for acts or omissions not in good faith or which involve intentional misconduct or a knowing violation of law, (iii) for any transaction from which the members, manager, director, or officer derived an improper personal benefit or (iv) for any act or omission occurring prior to the effective date of this Article. No amendment to or repeal of this Article shall apply to or have any effect on liability or alleged liability of any member, manager, director, or officer of JHLJ, L.L.C. for or with respect to any acts or omissions of such member, manager, director, or officer occurring prior to such amendment or repeal.

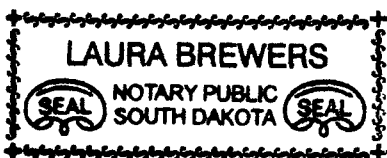
In witness whereof, the undersigned organizers hereby set their hands this 28th day of September, 2010.

Thomas H. Friberg
THOMAS H. FRIEBERG, Organizer

STATE OF SOUTH DAKOTA)
 : SS
COUNTY OF UNION)

On this the 28th day of September, 2010, before me, the undersigned officer, personally appeared THOMAS H. FRIEBERG, known to me or satisfactorily proven to be the person whose name is subscribed to the within instrument and acknowledged that he executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand and official seal.



Laura Brewers
Notary Public, South Dakota
My commission expires: _____

My Commission Expires 5-9-2016

CONSENT OF REGISTERED AGENT

Comes now THOMAS H. FRIEBERG and hereby consents to his appointment as the initial registered agent of JHLJ, L.L.C.

Dated this 28th day of September, 2010.

Thomas H. Friberg
THOMAS H. FRIEBERG, Registered Agent

2011

Enter Filing Year

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

ANNUAL REPORT DOMESTIC L.L.C.

Please Type or Print Clearly in Ink

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

FILE DATE 10/11/11
RECEIPT NO 2190507

RECEIVED
OCT 11 2011
S.D. SEC. OF STATE

Telephone # _____

325 1599

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

DL022516

JHLJ, L.L.C.
FRIEBERG, THOMAS H.
PO BOX 511
BERESFORD, 57004-0511

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

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

1009 Locust	Beresford	SD	57004
Street Address	City	State	ZIP+4

_____	_____	_____	_____
Mailing Address	City	State	ZIP+4

Email Address _____

4. The name of the South Dakota Registered Agent Thomas H. Frieburg

115 N. 3rd Street	Beresford	SD	57004
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4

PO Box 511	Beresford	SD	57004-0511
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

Email Address _____

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

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

Manager	Street Address	City	State	ZIP+4
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No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated 10-8-11


(Signature of an Authorized Person)

Jeff Olson

(Printed Name)

Email _____

*By signing this form you agree to have both the fee and the form processed electronically.



2012

Enter Filing Year

ANNUAL REPORT

FILE 9/17/2012

RECEIPT NO 63900

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

DOMESTIC LLC

Please Type or Print Clearly In Ink

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

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

DL022516
JHLJ, L.L.C.
1009 LOCUST
BERESFORD, SD 57004-2315

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

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

1009 LOCUST	BERESFORD	SD	57004-2315
Street Address	City	State	ZIP+4

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

Agent Name: THOMAS H. FRIEBERG

115 N 3RD STREET	BERESFORD	SD	57004-1741
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4

PO BOX 511	BERESFORD	SD	57004-0511
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

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

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

Date 09/17/2012

Signature Accepted Electronically

(Signature of an Authorized Person)

JEFF OLSON

(Printed Name)

2013

Enter Filing Year

ANNUAL REPORT

FILE 10/7/2013

RECEIPT NO 144641

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

DOMESTIC LLC
Please Type or Print Clearly In Ink

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

1. L.L.C. ID and Name:
DL022516
JHLJ, L.L.C.
1009 LOCUST
BERESFORD, SD 57004

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

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

1009 LOCUST	BERESFORD	SD	57004
Street Address	City	State	ZIP+4
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: THOMAS H. FRIEBERG

115 N 3RD STREET	BERESFORD	SD	57004-1741
Street Address or Rural Route Box Number in This State and PO BOX 511	City	State	ZIP+4
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

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

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

Date 10/07/2013

Signature Accepted Electronically

(Signature of an Authorized Person)
JEFF OLSON

(Printed Name)

2014

Enter Filing Year

ANNUAL REPORT

FILE DATE 8/17/2014

RECEIPT NO 224415

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

DOMESTIC LLC
Please Type or Print Clearly In Ink

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

1. L.L.C. ID and Name:
DL022516
JHLJ, L.L.C.
1009 LOCUST
BERESFORD, SD 57004

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

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

1009 LOCUST BERESFORD SD 57004
Street Address City State ZIP+4

Mailing Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: THOMAS H. FRIEBERG

115 N 3RD STREET BERESFORD SD 57004-1741
Street Address or Rural Route Box Number in This State and City State ZIP+4

PO BOX 511 BERESFORD SD 57004-0511

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

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

Manager Street Address City State ZIP+4

Manager Street Address City State ZIP+4

Manager Street Address City State ZIP+4

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

Dated 08/17/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

JEFFREY L OLSON

(Printed Name)

2015

ANNUAL REPORT

DOMESTIC LLC

SDCL 47-34A-211

Enter Filing Year

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

Please Type or Print Clearly In Ink

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

FILE DATE 8/17/2015

RECEIPT NO 327812

Telephone #

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

DL022516

JHLJ, L.L.C.

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

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

1009 LOCUST BERESFORD SD 57004

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

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

Email Address (Optional)

4. The name of the South Dakota Registered Agent

Agent Name: THOMAS H. FRIEBERG

115 N 3RD STREET BERESFORD SD 57004-1741

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

PO BOX 511 BERESFORD SD 57004-0511

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

Email Address (Optional)

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

Manager Actual Street Address City State ZIP+4

Manager Actual Street Address City State ZIP+4

Manager Actual Street Address City State ZIP+4

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

Dated 08/17/2015

Email (Optional)

Signature Accepted Electronically

(Signature of an Authorized Person)

JEFFREY L OLSON

(Printed Name)

2016

STATEMENT OF CHANGE OF REGISTERED OFFICE

FILE DATE 9/8/2016

Enter Filing Year

DOMESTIC LLC

RECEIPT NO 453275

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

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

Please Type or Print Clearly In Ink

FILING FEE: \$10.00 Make check payable to SECRETARY OF STATE

1. LLC ID and Name:

DL022516

Enter LLC ID

JHLJ, L.L.C.

Enter LLC Name

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

3. The address of the agent currently on file for this entity.

Agent Name: THOMAS H. FRIEBERG

115 N 3RD STREET BERESFORD SD 57004-1741
Actual Street Address or Rural Route Box Number City State ZIP+4
PO BOX 511 BERESFORD SD 57004-0511
Mailing Address, if Different from Street Address City State ZIP+4

4. If the address has changed, its new address.

New Agent Name: JEFFREY L OLSON

807 WEDGEWOOD W BERESFORD SD 57004
Actual Street Address or Rural Route Box Number in This State City State ZIP+4
Mailing Address in This State, if Different from Street Address City State ZIP+4

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 09/08/2016

Signature Accepted Electronically

(Signature of an Authorized Person)

JEFFREY L OLSON

(Printed Name)

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

9/8/2016 3:41:31 PM

2016

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

ANNUAL REPORT

DOMESTIC LLC

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

Please Type or Print Clearly In Ink

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

FILE DATE 9/8/2016

RECEIPT NO 453275

1. LLC ID and Name:

DL022516

Enter LLC ID

JHLJ, L.L.C.

Enter LLC Name

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

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

807 WEDGEWOOD W	BERESFORD	SD	57004
Actual Street Address or Rural Route Box Number	City	State	ZIP+4

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

4. The name of the South Dakota Registered Agent

Agent Name: JEFFREY L OLSON

807 WEDGEWOOD W	BERESFORD	SD	57004
Actual Street Address or Rural Route Box Number in This State	City	State	ZIP+4

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

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

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

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

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

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty (SDCL 47-1A-129).

Dated

Signature Accepted Electronically

(Signature of an Authorized Person)
JEFFREY L OLSON

(Printed Name)

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

9/8/2016 3:41:31 PM