

329 4037

Receipt Number: 1281260

File Number **DB047809**



ARTICLES_OF_INCORPORATION

For

STECK WHOLESALE FOODS, INC.

Filed at the request of:

**DARRELL A JESSE
CRARY HUFF INKSTER
600 STEVENS PORT DRIVE #300
DAKOTA DUNES SD 57049**

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

Filed in the office of the Secretary of State on: **Monday, January 12, 2004**



Secretary of State

Fee Received: \$125.00

329 4038

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

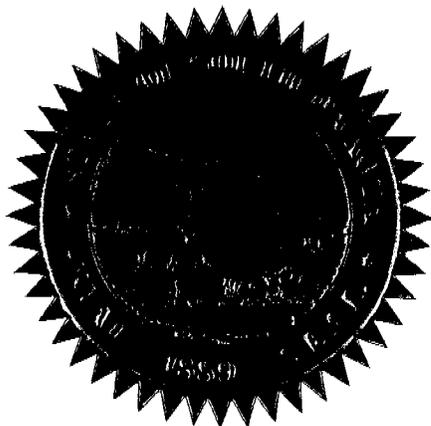
Certificate of Incorporation Business Corporation

ORGANIZATIONAL ID #: DB047809

I, **Chris Nelson**, Secretary of State of the State of South Dakota, hereby certify that the Articles of Incorporation of **STECK WHOLESALE FOODS, INC.** duly signed and verified, pursuant to the provisions of the South Dakota Business Corporation 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 Incorporation and attach hereto a duplicate of the Articles of Incorporation.

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 January 12, 2004.



Chris Nelson

Chris Nelson
Secretary of State

329 4039 02/25/2004
329 4039 01/30/2004

RECEIVED

JAN 12 04

S.D. SEC. of STATE

ARTICLES OF INCORPORATION
OF
STECK WHOLESALE FOODS, INC.

I, the undersigned, acting as incorporator of a corporation organized under the South Dakota Business Corporation Act, Chapter 47-2 of the South Dakota Codified Laws, hereby adopt the following Articles of Incorporation for such Corporation.

ARTICLE I.
Name

The name of the Corporation is **Steck Wholesale Foods, Inc.**

ARTICLE II.
Purpose

The purposes for which the corporation is organized are, to-wit:

1. That the corporation shall have unlimited power in, and to do any lawful act concerning, any or all lawful business for which corporations may be organized under said chapter;
2. The business of manufacturing and selling bakery goods, and related products and services.
3. To buy, sell, lease and manage such real estate and/or personal property as may be necessary or convenient for the proper conduct of the affairs of the corporation.

ARTICLE III.
Capital Stock

The aggregate number of shares which the corporation is authorized to issue is 100,000 consisting of 50,000 shares of Class A Voting Stock and 50,000 shares of Class B Non-Voting Stock, with a par value of \$1.00, for a total authorized capitalization of \$100,000.

The relative rights, privileges and limitations of the "Class A Common Shares" and the "Class B Common Shares" shall be in all respects identical, share for share, except that the voting power for all purposes shall be vested exclusively in the holders of the "Class A Common Shares" and the holders of the "Class B Common Shares" shall not have any voting power or be entitled to receive any notice of meetings of shareholders.

Distributions of either "Class A Common Shares" or "Class B Common Shares" may, in the discretion of the Board of Directors be made to the holders of either or both classes or shares.

No holder of any shares of the corporation shall have any pre-emptive right to purchase, subscribe for, or otherwise acquire any shares of the corporation of any class now or hereafter authorized.

DB 47809

329 4040
329 2144 01/30/2004

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

ARTICLE IV.
Duration

The corporation shall have perpetual duration.

ARTICLE V.
Registered Office and Registered Agent

The address of the initial registered office of the corporation is 600 Stevens Port Drive #300, Dakota Dunes, South Dakota, 57049 and the name of its initial Registered Agent at such address is Darrell A. Jesse.

ARTICLE VI.
Directors and Incorporator

The number of directors constituting the initial Board of Directors is two (2) and the names and addresses of the persons to serve as such directors until the first annual meeting of shareholders or until their successors are selected and qualified is set out below. Craig Stanley is also the incorporator:

Craig Stanley
444 Bluestem Trail
Dakota Dunes, SD 57049

Doug Heck
106 N 4th Street
Merville, IA 51039

ARTICLE VII.
Indemnification

The Corporation shall have power to indemnify every officer, director, employee or agent of the Association in such manner and in such amounts as may be permitted pursuant to South Dakota Laws, Sections 47-2-58.2 to 47-2-58.8, inclusive, as such statutes may be amended from time to time. To the extent permissible under South Dakota law, the officers, directors, employees, agents and committee members shall not be liable for any mistake of judgment, negligent or otherwise, except for their own individual willful misfeasance, malfeasance, misconduct, or bad faith. To the extent permissible under South Dakota law, the officers and directors shall have no personal liability with respect to any contract or other commitment made by them, in good faith, on behalf of the Corporation, and the Corporation shall indemnify and forever hold each such officer and director free and harmless against any and all liability to others on account of any such contract or commitment. The Corporation may maintain adequate general liability and officers' and directors'

334 1296

Receipt Number: 1355507

File Number **DB047809**



ARTICLES_OF_CORRECTION

For

STECK WHOLESALE FOODS, INC.

Filed at the request of:

CRARY HUFF INKSTER SHEEHAN ET AL
DARRELL JESSE
600 STEVENS PORT DR #300
DAKOTA DUNES SD 57049

State of South Dakota
Office of the Secretary of State

Filed in the office of the Secretary of State on: **September 07, 2004**



Secretary of State

Fee Received: \$20

**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 2-1-06
RECEIPT NO. 1524234
FEB 01 '06
S.D. SEC. of STATE

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



DB047809 JAN/2005
STECK WHOLESALE FOODS, INC.
JESSE, DARRELL A
600 STEVENS PORT DRIVE #300
DAKOTA DUNES SD 57049

Telephone # (605) 232-3340
FAX # (605) 232-8931

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 1001 River Drive, North Sioux City, SD 57049

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 Craig Stanley (President), Doug Heck (Secretary), and Craig Stanley (Treasurer).

SD law requires at least one director.

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

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:

Table with columns: NUMBER OF AUTHORIZED SHARES, CLASS, SERIES. Row: 100,000 / 50,000, A/B

6. NUMBER OF ISSUED SHARES

55,545

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

Dated 1/29/06

Signature [Handwritten Signature]

Craig Stanley
Printed Name

President
Title

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)

**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)

2008

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 01/18/08
RECEIPT NO. 1756103

RECEIVED

JAN 18 2008

S.D. SEC. OF STATE

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



DB047809 JAN/2007
STECK WHOLESALE FOODS, INC.
JESSE, DARRELL A
600 STEVENS PORT DRIVE #300
DAKOTA DUNES SD 57049

Telephone # 605-242-5006
FAX # 605-242-5009

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.

[X] 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 January 15, 2008

Signature [Handwritten Signature]

Craig Stanley
Printed Name

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)

363 4718

Receipt Number: 1848648

File Number **DB047809**



STATEMENT_OF_CHANGE

For

STECK WHOLESALE FOODS, INC.

Filed at the request of:

**KELLY J CHRISTMAN
CRARY HUFF ATTORNEYS AT LAW
711 SIOUX POINT RD STE 200
DAKOTA DUNES SD 570495081**

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

Filed in the office of the Secretary of State on: **Wednesday, November 12, 2008**



Secretary of State

Fee Received: \$ 10

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

Please submit one Original and one Photocopy

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

FILE DATE _____
RECEIPT NO _____
RECEIVED
NOV 12 2008
S.D. SEC. OF STATE

Telephone # _____

1. Corporate ID and Name:

DB047809
Steck Wholesale Foods, Inc.
Jesse, Darrell A.
711 Sioux Point Road, Suite 200
Dakota Dunes, SD 57049

Filed this 12th day of November, 2008

Chris Nelson
SECRETARY OF STATE

2. The name of the registered agent on file Darrell A. Jesse

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

600 Stevens Port Drive, Ste 300	Dakota Dunes	SD	57049
Street Address (Required)	City	State	ZIP+4

Mailing Address (Optional)	City	State	ZIP+4
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5. If the address has changed, its new address

711 Sioux Point Road, Suite 200	Dakota Dunes	SD	57049
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
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6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

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.

Dated 11-7-08

Darrell A. Jesse
(Signature of an authorized officer)

Darrell A. Jesse
(Printed Name)

Attorney/Registered Agent
(Title)

363 4719

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 2-19-09
RECEIPT NO 181566
RECEIVED
FEB 19 2009
S.D. SEC. OF STATE

1. Corporate ID and Name:

DB047809

STECK WHOLESALE FOODS, INC.
JESSE, DARRELL A.
711 SIOUX POINT ROAD, SUITE 200
DAKOTA DUNES, SD 5749

2009

Telephone # (605) 232-3340
FAX # (605) 232-8931
FILING DATE: Due during the month
the Certificate of Incorporation was
issued, and delinquent after the last
day of the following month.

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

1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
Street Address	City	State	ZIP+4
P.O. BOX 1070	NORTH SIOUX CITY	SD	57049
Mailing Address (Optional)	City	State	ZIP+4

3. The name of the South Dakota Registered Agent DARRELL A. JESSE

711 SIOUX POINT ROAD, SUITE 200	DAKOTA DUNES	SD	57049
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

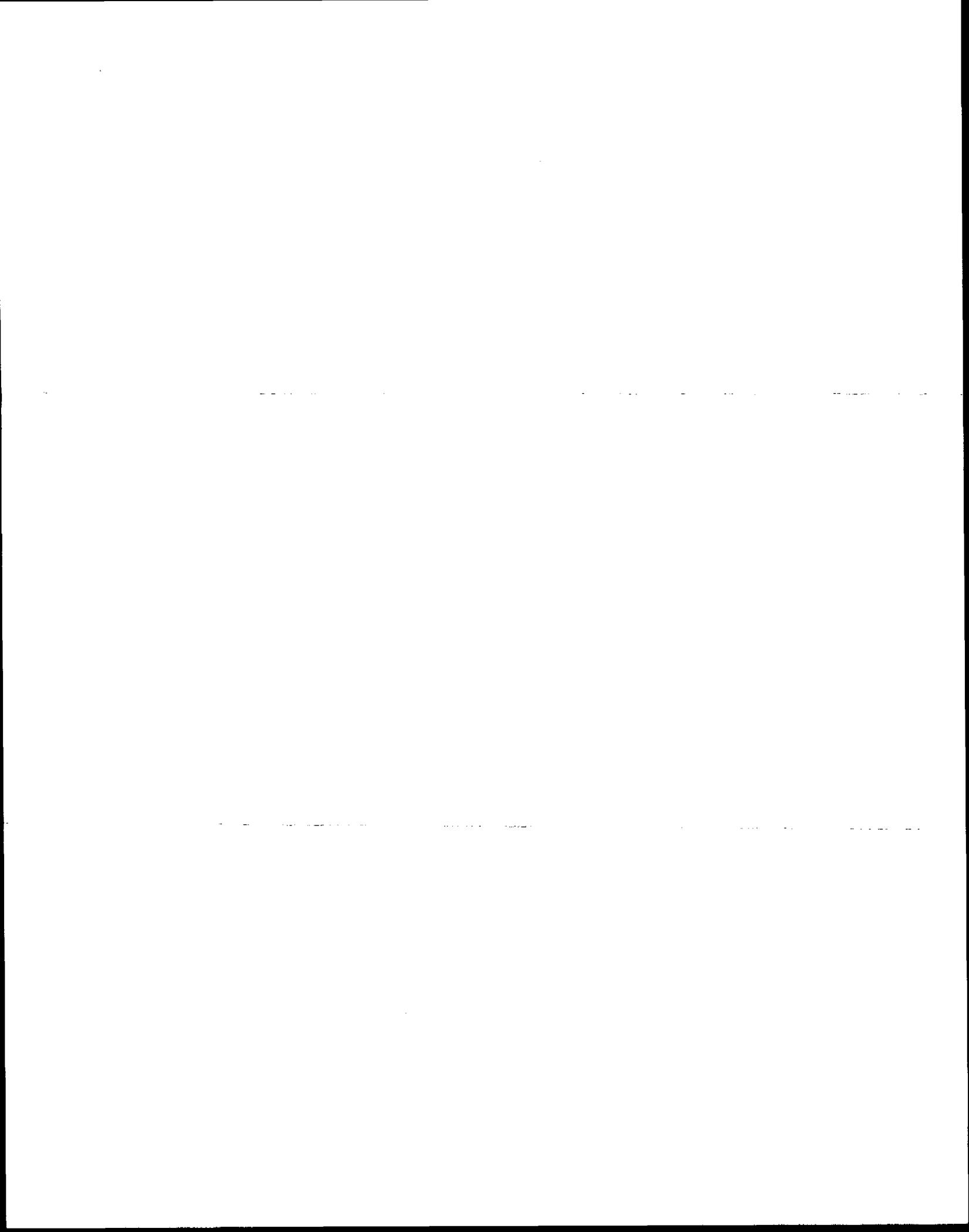
4. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	CRAIG STANLEY	384 OXBOW TRAIL	DAKOTA DUNES	SD	57049
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	DOUG HECK	106 N. 4TH	MOVILLE	IA	51039
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JIM CALVERT	426 FAWN HOLLOW TRAIL	DAKOTA DUNES	SD	57049
	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

Dated FEBRUARY 10, 2009


(Signature of an authorized officer)
CRAIG STANLEY
(Printed Name)
PRESIDENT
(Title)

286 2873 982



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

2010 ANNUAL REPORT
DOMESTIC

Please Type or Print Clearly in Ink

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

FILE DATE	01/02/10
RECEIPT NO	1981712
RECEIVED	
DEC 23 2009	
S.D. SEC. OF STATE	

Telephone #	(605) 232-3340
FAX #	(605) 232-8931
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.	

1. Corporate ID and Name:

DB047809

STECK WHOLESALE FOODS, INC.
JESSE, DARRELL A.
711 SIOUX POINT ROAD, SUITE 200
DAKOTA DUNES, SD 5749

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

1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
Street Address	City	State	ZIP+4
P.O. BOX 1070	NORTH SIOUX CITY	SD	57049
Mailing Address (Optional)	City	State	ZIP+4

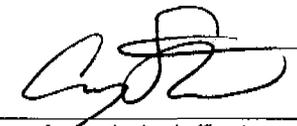
3. The name of the South Dakota Registered Agent DARRELL A. JESSE

711 SIOUX POINT ROAD, SUITE 200	DAKOTA DUNES	SD	57049
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

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.

<input checked="" type="checkbox"/>	CRAIG STANLEY	384 OXBOW TRAIL	DAKOTA DUNES	SD	57049
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>		Street Address	City	State	ZIP+4
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	DOUG HECK	106 N. 4TH	MOVILLE	IA	51039
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JIM CALVERT	426 FAWN HOLLOW TRAIL	DAKOTA DUNES	SD	57049
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>		Street Address	City	State	ZIP+4
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>		Street Address	City	State	ZIP+4
	Director	Street Address	City	State	ZIP+4

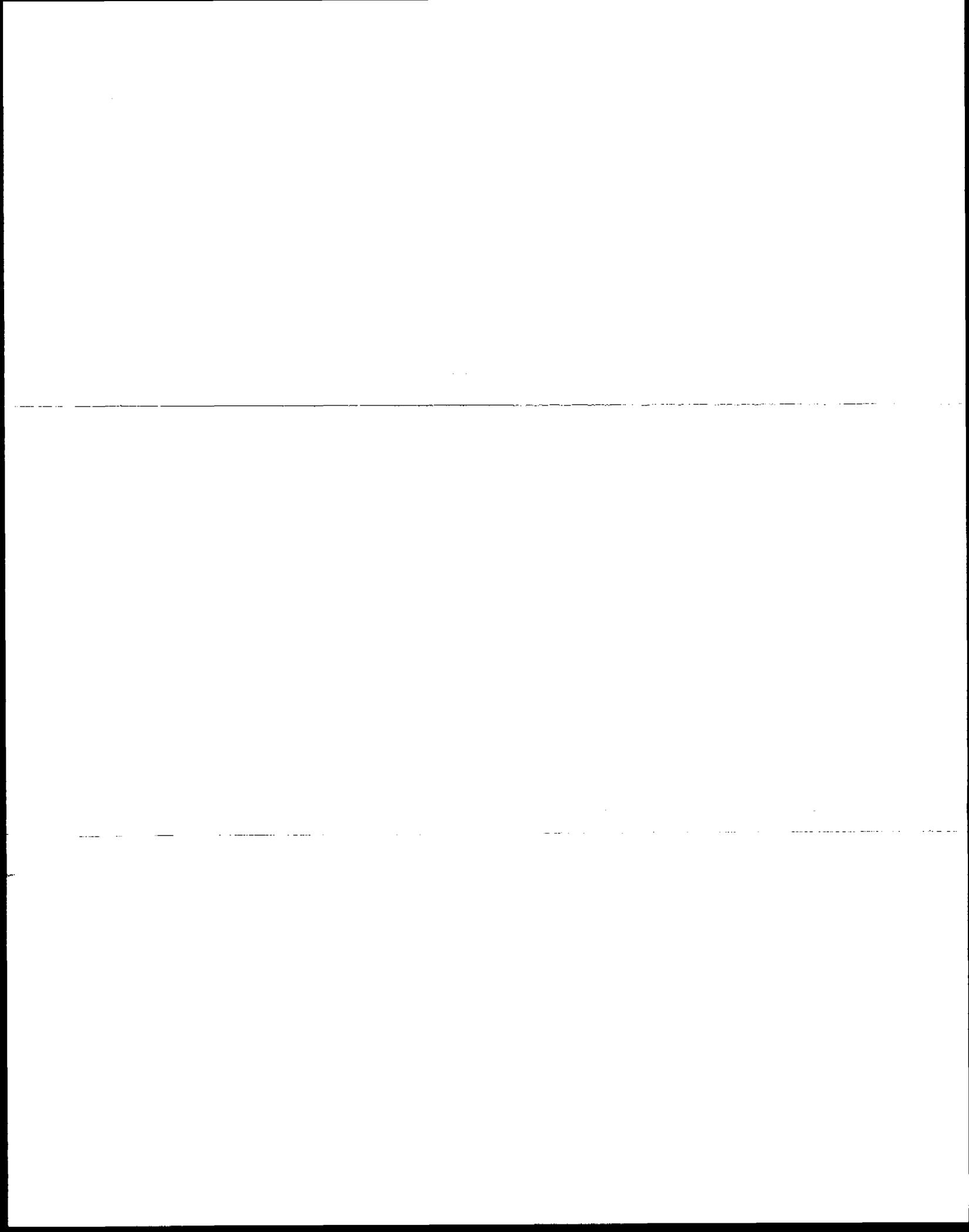
Dated 12/17/09


(Signature of an authorized officer)

CRAIG STANLEY
(Printed Name)

PRESIDENT
(Title)

299 2641



315 1510 02/16/2011

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: \$50 Make check payable to **SECRETARY OF STATE**

FILE DATE	<u>2/9/11</u>
RECEIPT NO	<u>2112425</u>
RECEIVED	
FEB 09 2011	
S.D. SEC. OF STATE	

Telephone #	<u>(605) 232-3340</u>
FAX #	<u>(605) 232-8931</u>
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.	

1. Corporate ID and Name:

Db047809

STECK WHOLESALE FOODS, INC.
JESSE, DARRELL A.
711 SIOUX POINT ROAD, SUITE 200
DAKOTA DUNES, SD 57049

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.

<u>1001 RIVER DRIVE</u>	<u>NORTH SIOUX CITY</u>	<u>SD</u>	<u>57049</u>
Street Address	City	State	ZIP+4
<u>Mailing Address (Optional)</u>	<u>City</u>	<u>State</u>	<u>ZIP+4</u>

4. The name of the South Dakota Registered Agent DARRELL A. JESSE

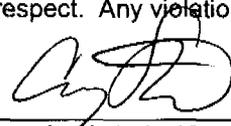
<u>711 SIOUX POINT ROAD, SUITE 200</u>	<u>DAKOTA DUNES</u>	<u>SD</u>	<u>57049</u>
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
<u>Mailing Address in This State, if Different from Street Address</u>	<u>City</u>	<u>State</u>	<u>ZIP+4</u>

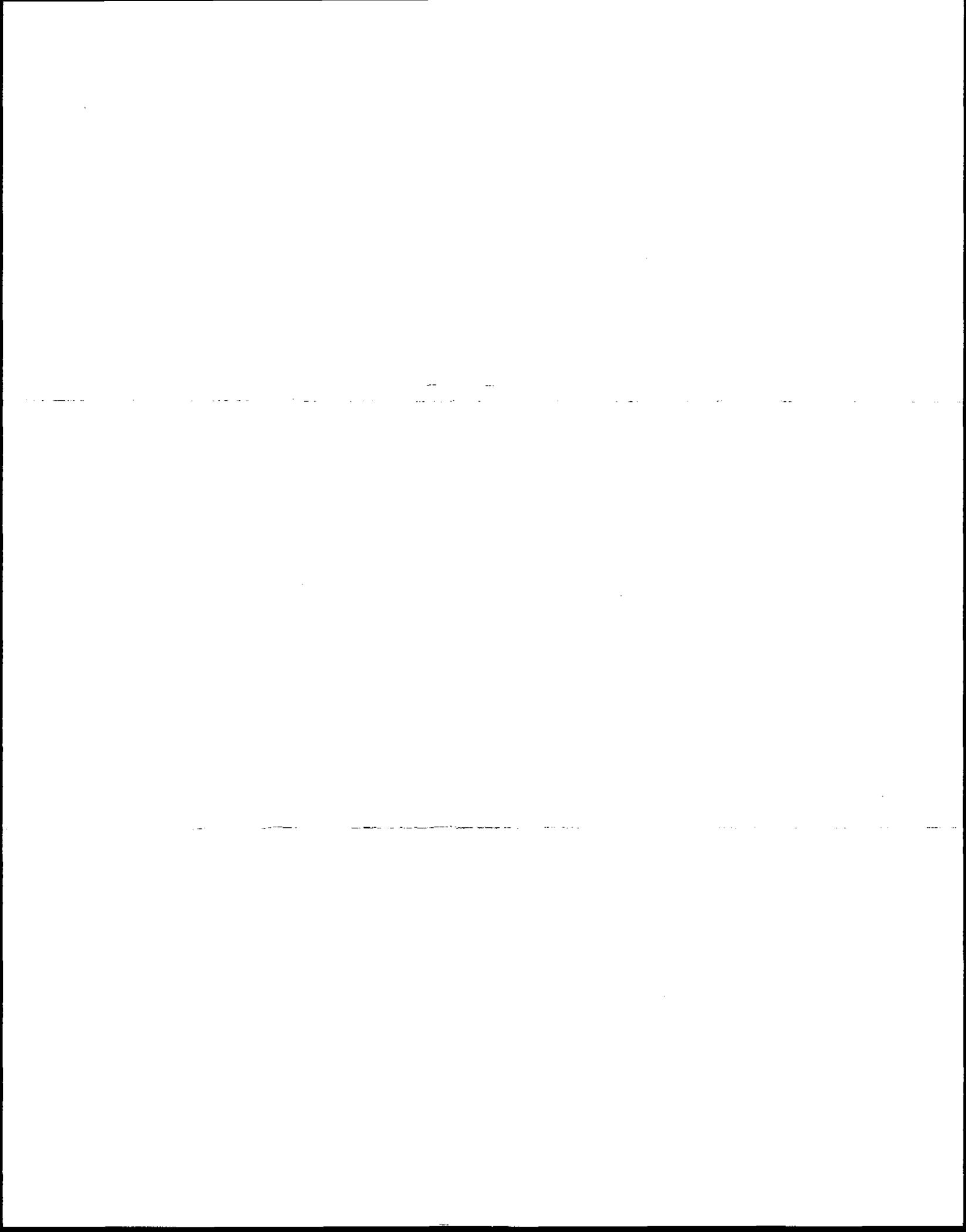
5. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	CRAIG STANLEY	384 OXBOW	DAKOTA DUNES	SD	57049
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	JIM CALVERT / DOUG HECK	106 N. 4TH	MOVILLE	IA	51039
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	DOUG HECK	106 N. 4TH	MOVILLE	IA	51039
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JIM CALVERT	426 FAWN HOLLOW	DAKOTA DUNES	SD	57049
	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

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

Dated 1/26/11


 (Signature of an Authorized Person)
 CRAIG STANLEY
 (Printed Name)



2012

Enter Filing Year

ANNUAL REPORT

FILE DATE 01/18/2012

RECEIPT NO 17648

Secretary of State Office

500 E Capitol Ave

Pierre, SD 57501

(605)773-4845

DOMESTIC

Please Type or Print Clearly In Ink

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

1. Corporate ID and Name:

DB047809

STECK WHOLESALE FOODS, INC.

1001 RIVER DRIVE

NORTH SIOUX CITY, SD 57049

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

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

1001 RIVER DRIVE

Street Address

NORTH SIOUX CITY

City

SD

State

57049

ZIP+4

Mailing Address

City

State

ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name:

DARRELL A. JESSE

711 SIOUX POINT RD, STE 200

Street Address or Rural Route Box Number in This State and

DAKOTA DUNES

City

SD

State

57049-5081

ZIP+4

Mailing Address in This State, if Different from Street Address

City

State

ZIP+4

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

<input checked="" type="checkbox"/>	CRAIG STANLEY	384 OXBOW TRAIL	DAKOTA DUNES	SD	57049
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JIM CALVERT/DOUG HECK	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	DOUG HECK	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JIM CALVERT	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
	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

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 01/18/2012

Signature Accepted Electronically

(Signature of an Authorized Person)

CRAIG STANLEY

(Printed Name)

2013

Enter Filing Year

ANNUAL REPORT

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

DOMESTIC

Please Type or Print Clearly In Ink

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

FILE 1/16/2013

RECEIPT NO 88303

1. Corporate ID and Name:

DB047809
STECK WHOLESALE FOODS, INC.
1001 RIVER DRIVE
NORTH SIOUX CITY, SD 57049

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

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

1001 RIVER DRIVE NORTH SIOUX CITY SD 57049

Street Address City State ZIP+4

PO BOX 1070 NORTH SIOUX CITY SD 57049

Mailing Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: DARRELL A. JESSE

711 SIOUX POINT RD, STE 200 DAKOTA DUNES SD 57049-5081

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

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

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

<input checked="" type="checkbox"/>	CRAIG STANLEY	384 OXBOW TRAIL	DAKOTA DUNES	SD	57049
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JIM CALVERT/DOUG HECK	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	DOUG HECK	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JIM CALVERT	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
	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

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 01/16/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

CRAIG STANLEY

(Printed Name)

2014

Enter Filing Year

ANNUAL REPORT

FILE 1/31/2014

RECEIPT NO 173552

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

DOMESTIC

Please Type or Print Clearly In Ink

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

1. Corporate ID and Name:

DB047809
STECK WHOLESALE FOODS, INC.
1001 RIVER DRIVE
NORTH SIOUX CITY, SD 57049

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

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

1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
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Street Address	City	State	ZIP+4
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PO BOX 1070	NORTH SIOUX CITY	SD	57049
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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: DARRELL A. JESSE

711 SIOUX POINT RD, STE 200	DAKOTA DUNES	SD	57049-5081
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Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
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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 addresses of its principal officers and directors. Please place a checkmark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	CRAIG STANLEY	384 OXBOW TRAIL	DAKOTA DUNES	SD	57049
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JAMES CALVERT/DOUG HECK	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	DOUG HECK	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JAMES CALVERT	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
	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

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 01/31/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

CRAIG STANLEY

(Printed Name)

2015

Enter Filing Year

ANNUAL REPORT

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

DOMESTIC

Please Type or Print Clearly In Ink

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

FILE DATE 2/16/2015

RECEIPT NO 272661

1. Corporate ID and Name:

DB047809
STECK WHOLESALE FOODS, INC.
1001 RIVER DRIVE
NORTH SIOUX CITY, SD 57049

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

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

1001 RIVER DRIVE NORTH SIOUX CITY SD 57049

Street Address City State ZIP+4

PO BOX 1070 NORTH SIOUX CITY SD 57049

Mailing Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: DARRELL A. JESSE

711 SIOUX POINT RD, STE 200 DAKOTA DUNES SD 57049-5081

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

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

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

CRAIG STANLEY 384 OXBOW TRAIL DAKOTA DUNES SD 57049

President Street Address City State ZIP+4

JAMES CALVERT/DOUG HECK 1001 RIVER DRIVE NORTH SIOUX CITY SD 57049

Vice President Street Address City State ZIP+4

DOUG HECK 1001 RIVER DRIVE NORTH SIOUX CITY SD 57049

Secretary Street Address City State ZIP+4

JAMES CALVERT 1001 RIVER DRIVE NORTH SIOUX CITY SD 57049

Treasurer Street Address City State ZIP+4

Director Street Address City State ZIP+4

Director Street Address City State ZIP+4

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

Dated 02/16/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

CRAIG STANLEY

(Printed Name)

2016

Enter Filing Year

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

ANNUAL REPORT

DOMESTIC CORPORATION

SDCL 59-11-24, 24.1

Please Type or Print Clearly In Ink

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

FILE DATE 1/25/2016

RECEIPT NO 374305

1. Corporate ID and Name:

DB047809

Enter Corporate ID

STECK WHOLESALE FOODS, 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).

1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
Actual Street Address or Rural Route Box Number	City	State	ZIP+4
PO BOX 1070	NORTH SIOUX CITY	SD	57049
Mailing Address, if Different from Street Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: DARRELL A. JESSE

711 SIOUX POINT RD, STE 200	DAKOTA DUNES	SD	57049-5081
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 47-1A-732(1), the board of directors has been eliminated, list the names of the shareholders.

<input checked="" type="checkbox"/> CRAIG STANLEY	384 OXBOW TRAIL	DAKOTA DUNES	SD	57049
President	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/> JAMES CALVERT/DOUG HECK	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
Vice President	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/> DOUG HECK	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
Secretary	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/> JAMES CALVERT	1001 RIVER DRIVE	NORTH SIOUX CITY	SD	57049
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. Beneficial Interest (optional)

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

Dated

Signature Accepted Electronically

(Signature of an Authorized Person)

CRAIG STANLEY

(Printed Name)