

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

Certificate of Organization Domestic LLC

ORGANIZATIONAL ID# DL044965

I, Shantel Krebs, Secretary of State of the State of South Dakota, hereby certify that the Articles of Organization of

BARNES, LLC

duly signed and verified, 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 09/02/2015.

Shantel Krebs

Shantel Krebs
Secretary of State

9/2/2015 10:19:07 AM

Change ID: 1273877

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

ARTICLES OF ORGANIZATION DOMESTIC LIMITED LIABILITY COMPANY

Please Type or Print Clearly in Ink

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

FILING FEE: \$150 payable to SECRETARY OF STATE

RECEIVED
SEP 02 2015
S.D. SEC. OF STATE

Telephone # _____
FAX # _____

Filed this 2 day of
Sept 2015

Shantal Krebs
SECRETARY OF STATE

Article I

The name of the company is BARNES, LLC

The name must contain limited liability company, limited company or the abbreviation L.L.C., LLC, L.C. or LC. Limited may be abbreviated as Ltd. and company may be abbreviated as Co.

Article II

The duration of the company if other than perpetual is _____

Article III

The address of the initial designated office in or out of the State of South Dakota where the company conducts its business.

19254 321ST AVE HARROLD SD 57536
Street Address City State ZIP+4

Mailing Address (Optional) City State ZIP+4

Article IV

The South Dakota Registered Agent name EMILY J. SOVELL

110 S. MAIN ONIDA SD 57564
Street Address or Rural Route Number in This State and City State ZIP+4

PO BOX 505 ONIDA SD 57564
Mailing Address in This State, if Different from Street Address City State ZIP+4

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

Article V

The name and address of each organizer

JACOB W. BARNES	19254 321ST AVE	HARROLD	<input type="checkbox"/> SD <input type="checkbox"/> 57536
Name	Street Address	City	State ZIP+4
Name	Street Address	City	State ZIP+4
Name	Street Address	City	State ZIP+4
Name	Street Address	City	State ZIP+4

Article VI

Check one:

- The company will be member managed.
 The company will be manager managed.

If this company is to be manager managed, please state the name and address of each initial manager.

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

Article VII

Whether one or more of the members of the company are to be liable for its debts and obligations as set forth under SDCL 47-34A-303 (c).

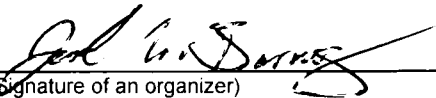
Article VIII

Any other provisions not inconsistent with law, which the members elect to set out in the articles of organization.

The Articles of Organization must be executed by the organizers.

Dated Aug 27th 2015

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.


(Signature of an organizer)

Jacob W. Barnes
(Printed Name)

(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

(Title)



South Dakota Secretary of State
SHANTEL KREBS

Return To: SOVELL LAW OFFICE PC EMILY J SOVELL
110 S. MAIN PO BOX 505
ONIDA, SD 57564

From: Secretary of State Shantel Krebs
Corporations Division

Filing Date: 09/02/2015

Re: BARNES, LLC (DL044965)
Articles of Organization

The documents on behalf of BARNES, LLC have been received and filed. Attached is the Certificate along with a receipt for the filing fee of \$150.00. Below is a summary of the transaction.

Remitter	Address	Amount Paid
JACOB W. BARNES OR SARA J. BARNES	19254 321ST AVE KARROLD, SD 57536	\$57,536.00
Total:		\$57,536.00

Description	Invoice Date	Qty	Receipt #	Subtotal
Articles of Organization	09/02/2015	1	332692	\$150.00
Total:				\$150.00

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 10/31/2016

RECEIPT NO 468947

1. LLC ID and Name:

DL044965

Enter LLC ID

BARNES, LLC

Enter LLC Name

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

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

19254 321ST AVE	HARROLD	SD	57536
Actual Street Address or Rural Route Box Number	City	State	ZIP+4

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: EMILY J. SOVELL

110 S. MAIN	ONIDA	SD	57564
Actual Street Address or Rural Route Box Number in This State	City	State	ZIP+4

PO BOX 505	ONIDA	SD	57564
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
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<input type="checkbox"/>	Manager	Actual Street Address	City	State	ZIP+4
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<input type="checkbox"/>	Manager	Actual Street Address	City	State	ZIP+4
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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)
JACOB W BARNES

(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.

10/31/2016 8:57:17 AM