K\00203\14 - 379

State of South Dakota

OFFICE OF THE SECRETARY OF STATE

Certificate of Incorporation
Business Corporation

ORGANIZATIONAL ID #: DB045054

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, hereby certify that the Articles of Incorporation of MIDLAND CONTRACTING, 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 February 1, 2002.

Joyce Hazeltine
Secretary of State

IncorpCertBusiness Merge.doc

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, SD 57501
605-773-4845

ARTICLES OF INCORPORATION

RECEIVED
0020314.0379
3/20/02 FEB 01 '02
S.D. SEC. OF STATE

Executed by the undersigned for the purpose of forming a South Dakota Business Corporation under Chapter 47 of SDCL.

ARTICLE I

The name of the corporation is Midland Contracting, Inc.

ARTICLE II

The period of existence is perpetual.

ARTICLE III

The purposes for which the corporation is organized:

Highway construction and leasing of construction equipment.

ARTICLE IV

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

Number	Class	Series	Par value per share or statement that shares are without par value
10,000	Common	None	$100.00

ARTICLE V

The preferences, limitations, designation and relative rights of each class or series of stock: same

ARTICLE VI

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

ARTICLE VII

The complete address, including the street address or a statement that there is no street address, of its registered office is 1808 Cardinal Lane, Huron, South Dakota and the name of its registered agent at such address is Richard K. Langbehn.

ARTICLE VIII

The number of directors constituting the initial board of directors is two (2) and the names and addresses of the persons who are to serve as directors are:

Name	Address
Richard K. Langbehn (President/Treasurer)	1808 Cardinal Lane Huron, SD 57350

Michael J. Syrstad (Vice-President/Secretary) 3370 Moody County Rd. #2
Brookings, SD 57006

ARTICLE IX

The names and addresses of the incorporators are:

Name	Address
Richard K. Langbehn	1808 Cardinal Lane Huron, SD 57350
Michael J. Syrstad	3370 Moody County Rd. #2 Brookings, SD 57006

ARTICLE X
(Other provisions)

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

ALL INCORPORATORS MUST SIGN BELOW AND SIGNATURES MUST BE NOTARIZED.

Dated this 31st day of January, 2002.

Richard K. Langbehn Michael J. Syrstad

STATE OF SOUTH DAKOTA)
)ss
COUNTY OF BEADLE)

On this the 31st day of January, 2002, before me personally appeared Richard K. Langbehn and Michael J. Syrstad, known to me or satisfactorily proven to be the persons who are described in, and who executed the within instrument and acknowledge to me that they executed the same.

Notary Public

My Commission Expires:

Notary Seal

The Consent of Appointment below must be signed by the registered agent

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, Richard K. Langbehn, hereby give my consent to serve as the registered agent for Midland Contracting, Inc.

Dated this 31st day of January, 2002.

Richard K. Langbehn

0020314

0020314.0379
3/20/02

Receipt Number: 1061089

File Number DB045054

ART OF INC

For

MIDLAND CONTRACTING, INC.

Filed at the request of:

BLUE & HAEDER
VICKI SUPLER
PO BOX 1414
HURON SD 57350

State of South Dakota
Office of the Secretary of State

Filed in the office of the Secretary of State on: **February 01, 2002**

Secretary of State

Fee Received: $150 AC. and a refund check in the amount of $50

0303219.4683

2003 ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

0303219.4683
3/20/03

FILE DATE 2/14/03
RECEIPT NO. RECEIVED 1186071
JAN 22 '03
S.D. SEC. OF STATE

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

1. Corporate Name, Registered Agent and Registered Address:

DB045054 FEB/0000
MIDLAND CONTRACTING, INC.
LANGBEHN, RICHARD K.
1808 CARDINAL LANE
HURON SD 57350-3424

Telephone # 605-352-2400
FAX # 605-352-0060
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 Highway construction and leasing of construction equipment.

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
Richard K. Langbehn	President	1808 Cardinal Lane	Huron	SD	57350
Michael J. Syrstad	Vice President	3370 Moody County Rd.2, Brookings, SD 57006			
Michael J. Syrstad	Secretary	" "	"	"	"
Richard K. Langbehn	Treasurer	1808 Cardinal Lane	Huron	SD	57350

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
10,000	Common	None	$100

5. NUMBER OF SHARES ACTUALLY ISSUED

	CLASS	SERIES
10	Common	None

6. The amount of its stated capital is $ 1,000 . (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 1-20-03 By [signature] (Signature)

Its Pres (Title)

STATE OF South Dakota
COUNTY OF Beadle ss

On this the 20th day of January, 2003, before me, Mary Ann Gegelein personally appeared Richard Langbehn, 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 4-20-03

[signature] Notary Public

(Notarial Seal)

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845 FAX (605) 773-4550
www.state.sd.us/sos/sos.htm

SOS CRP 11/01

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)

225 2612 01/30/2004

2004 ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: $30 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF $50 APPLIES TO ALL LATE FILINGS

FILE DATE 02/01/04
RECEIPT NO. 1285029

RECEIVED

JAN 21 '04

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DB045054

DB045054 FEB/2003
MIDLAND CONTRACTING, INC.
LANGBEHN, RICHARD K.
1808 CARDINAL LANE
HURON SD 57350-3424

Telephone # 605-352-2400
FAX # 605-352-9064
Federal Taxpa

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 below 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 1-20-04

By [signature]
(Signature)

Its President
(Title)

STATE OF SD
COUNTY OF Beadle
ss

On this the 20th day of January, 2004, before me, Rachel Peskey personally appeared Richard K Langbehn, 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 08-14-2008

[signature]
Notary Public

(Notarial Seal)

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.sdsos.gov

SOS CRP 07/03

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)

233 3095 02/10/2005

2005 ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: $30 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF $50 APPLIES TO ALL LATE FILINGS

FILE DATE 2/3/05
RECEIPT NO. 1406992
RECEIVED
FEB 03 '05
S.D. SEC. of STATE

1. Corporate Name, Registered Agent and Registered Address:

DB045054
DB045054 FEB/2004
MIDLAND CONTRACTING, INC.
LANGBEHN, RICHARD K.
1808 CARDINAL LANE
HURON SD 57350-3424

Telephone # 605-352-2400
FAX # 605-352-9064
Federal Taxpa
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 character of the business in which it is actually engaged in South Dakota Highway construction and leasing of construction equipment.

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
Richard K. Langbehn	President	38820 203rd St.	Wolsey	SD	57384
Michael J. Syrstad	Vice President	7080 Sunset Rd	Brookings	SD	57006
Michael J. Syrstad	Secretary	7080 Sunset Rd	Brookings	SD	57006
Richard K. Langbehn	Treasurer	38820 203rd St.	Wolsey	SD	57384

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
10,000	Common	None	$100.00

5. NUMBER OF SHARES ACTUALLY ISSUED

NUMBER OF SHARES ACTUALLY ISSUED	CLASS	SERIES
10,000	Common	None

6. The amount of its stated capital is $ 1,000.00 . (Money received for issued shares)

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

Dated [redacted]

(Signature)

President
(Title)

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.sdsos.gov

SOS CRP 07/04

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 Midland Contracting, Inc.

2. The previous street address, or a statement that there is no street address, of its registered office

1808 Cardinal Lane Huron, SD ZIP + 4 57350-3424

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.

1848 Dakota Avenue S. Huron, SD ZIP + 4 57350-3424

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 [redacted]

_____
(Signature)

President
(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)

Revised 07/04

245 0658

2006 ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 02/01/06
RECEIPT NO. 1518683

RECEIVED
JAN 24 '06
S.D. SEC. of STATE

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

DB045054
DB045054 FEB/2005
MIDLAND CONTRACTING, INC.
LANGBEHN, RICHARD K.
1848 DAKOTA AVE S
HURON SD 57350-4066

Telephone # 605-352-2400
FAX # 605-352-9064

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 1848 Dakota Ave S, Huron, SD 57350

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
Richard K. Langbehn	President	38820 203rd St.	Wolsey	SD	57384
Michael J Syrstad	Vice President	7080 Sunset Rd	Brookings	SD	57006
Michael J Syrstad	Secretary	7080 Sunset Rd	Brookings	SD	57006
Richard K Langbehn	Treasurer	38820 203rd St.	Wolsey	SD	57384

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. Provide a brief description of the nature of the business Highway construction + leasing of construction equipment.

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

NUMBER OF AUTHORIZED SHARES	CLASS	SERIES
10,000	Common	None

6. NUMBER OF ISSUED SHARES

NUMBER OF ISSUED SHARES	CLASS	SERIES
10,000	Common	None

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

Dated 1-23-06

[signature]
Signature

Richard K Langbehn
Printed Name

President
Title

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.sdsos.gov

SOS CRP 07/05

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)

2007 ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 02/12/07
RECEIPT NO. 164731

RECEIVED
FEB 12 2007
S.D. SEC. OF STATE

258 3712

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

DB045054
DB045054 FEB/2006
MIDLAND CONTRACTING, INC.
LANGBEHN, RICHARD K.
1848 DAKOTA AVE S
HURON SD 57350-4066

Telephone # 605-352-2400
FAX # 605-352-9064

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 39751 US Hwy 14W, Huron, SD

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
Richard K. Langbehn	President	38820 203rd St.	Wolsey	SD	57384
Michael J. Syrstad	Vice President	7080 Sunset Rd	Brookings	SD	57006
Michael J. Syrstad	Secretary	7080 Sunset Rd	Brookings	SD	57006
Richard K. Langbehn.	Treasurer	38820 203rd St	Wolsey	SD	57384

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. Provide a brief description of the nature of the business Highway construction + leasing of construction equipment.

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

NUMBER OF AUTHORIZED SHARES	CLASS	SERIES
10,000	Common	None

6. NUMBER OF ISSUED SHARES

NUMBER OF ISSUED SHARES	CLASS	SERIES
10,000	Common	None

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

Dated 1-30-07

[signature]
Signature

Richard K. Langbehn
Printed Name

President
Title

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.sdsos.gov

SOS CRP 07/05

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 Midland Contracting Inc.

2. The street address, or a statement that there is no street address, of its current registered office

1848 Dakota Ave S Huron, SD ZIP + 4 57350-3424

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. P.O. Box 218 Huron, SD 57350

39751 US Hwy 14 Huron, SD ZIP + 4 57350

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 1-30-07

Richard K Langbehn
Signature

Richard K. Langbehn
Printed Name

President.
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)

275 3508

2008 **ANNUAL REPORT**

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 04/24/08
RECEIPT NO. 179106
RECEIVED
APR 24 2008
S.D. SEC. OF STATE

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

Midland Contracting, Inc.
39751 US Hwy 14
PO Box 218
Huron, SD 57350-4066

DB045054

Telephone # 605-352-2400
FAX # 605-352-9064

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, a statement of change must be filed. **Any change requires full completion 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 ______

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

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

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

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 ______

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 AND OUTSTANDING SHARES	CLASS	SERIES

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

Dated ______

[signature]
Signature

Mike Syrstad
Printed Name

Vice President.
Title

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.sdsos.gov

278 2845 07/25/2008

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

Amended
ANNUAL REPORT
DOMESTIC

Please Type or Print Clearly in Ink

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

FILE DATE 07/23/08
RECEIPT NO

RECEIVED
JUL 23 2008
S.D. SEC. OF STATE

1. Corporate ID and Name:

DB045054
Midland Contracting, Inc.
39751 US Hwy 14
PO Box 218
Huron, SD 57350

Telephone # (605) 352-2400
FAX # (605) 352-9064

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.

39751 US Hwy 14\	Huron	SD	57350
Street Address	City	State	ZIP+4
PO Box 218	Huron	SD	57350
Mailing Address (Optional)	City	State	ZIP+4

3. The name of the South Dakota Registered Agent Michael J. Syrstad

39751 US Hwy 14	Huron	SD	57350
Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
PO Box 218	Huron	SD	57350
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.

☑	Michael J. Syrstad	7080 Sunset Road	Brookings	SD	57006
	President	Street Address	City	State	ZIP+4
☑	Brandon M. Syrstad	45742 220th St	Arlington	SD	57212
	Vice President	Street Address	City	State	ZIP+4
☑	Rosalie Schmidt	955 Arizona Ave SW	Huron	SD	57350
	Secretary	Street Address	City	State	ZIP+4
☑	Michael J. Syrstad	7080 Sunset Road	Brookings	SD	57006
	Treasurer	Street Address	City	State	ZIP+4
☑	Michael J. Syrstad	7080 Sunset Road	Brookings	SD	57006
	Director	Street Address	City	State	ZIP+4
☐					
	Director	Street Address	City	State	ZIP+4

Dated [redacted]

Mike Syrstad
(Signature of an authorized officer)

Michael J. Syrstad
(Printed Name)

President
(Title)

358 6909

Receipt Number: 1817382

File Number DB045054

DB045054

STATEMENT OF CHANGE

STATEMENT_OF_CHANGE

For

MIDLAND CONTRACTING, INC.

Filed at the request of:

MIDLAND CONTRACTING, INC
PO BOX 218
HURON SD 573500218

State of South Dakota
Office of the Secretary of State

Filed in the office of the Secretary of State on: **Wednesday, July 23, 2008**

Chris Nelson

Secretary of State

Fee Received: $ 10

358 6910

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
JUL 23 2008
S.D. SEC. OF STATE

1. Corporate ID and Name:

DB045054
Midland Contracting, Inc.
39751 US Hwy 14
PO Box 218
Huron, SD 57350

Filed this 23rd day of July, 2008
Chris Nelson
SECRETARY OF STATE

Telephone # (605) 352-2400
FAX # (605) 352-9064

2. The name of the registered agent on file Richard K. Langbehn

   The name of the successor registered agent Michael J. Syrstad

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

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

39751 US Hwy 14	Huron	SD	57350
Street Address (Required)	City	State	ZIP+4
	Huron	SD	57350
Mailing Address (Optional)	City	State	ZIP+4

5. If the address has changed, its new address

39751 US Hwy 14	Huron	SD	57350
Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
PO Box 218	Huron	SD	57350
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.

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 [redacted]

Mike Syrstad
(Signature of an authorized officer)

Michael J. Syrstad
(Printed Name)

President
(Title)

286 0101 02/12/2009

2009 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: $30 Make check payable to SECRETARY OF STATE

FILE DATE 2/1/09
RECEIPT NO. RECEIVED
JAN 23 2009
S.D. SEC. OF STATE
187842

1. Corporate Name, Registered Agent Name and Address:

DB045054

DB045054 FEB/2008
MIDLAND CONTRACTING, INC.
SYRSTAD, MICHAEL J.
PO BOX 218
HURON SD 57350-0218

Telephone # 605-352-2400
FAX # 605-352-9064

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.

Street Address	City	State	ZIP+4
39751 US Hwy 14	Huron	SD	57350
PO Box 218 (Mailing Address (Optional))	Huron	SD	57350

3. The name of the South Dakota Registered Agent Michael J. Syrstad

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
39751 US Hwy 14	Huron	SD	57350
PO Box 218 (Mailing Address (Optional – Required to be a South Dakota Address))	Huron	SD	57350

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.

	Street Address	City	State	ZIP+4
☑ Michael J. Syrstad (President)	7080 Sunset Road	Brookings	SD	57006
☐ Brandon M. Syrstad (Vice President)	45742 220th St	Arlington	SD	57212
☐ Rosalie Schmidt (Secretary)	955 Arizona Ave SW	Huron	SD	57350
☐ Michael J. Syrstad (Treasurer)	7080 Sunset Road	Brookings	SD	57006
☐ Michael J. Syrstad (Director)	7080 Sunset Road	Brookings	SD	57006
☐ (Director)				

Dated 1-23-09

Mike Syrstad
(Signature of an authorized officer)

Mike Syrstad
(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)

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 02/01/10
RECEIPT NO 1989514
RECEIVED
JAN 20 2010
S.D. SEC. OF STATE

300 2676

1. Corporate Name, Registered Agent Name and Address:

DB045054

DB045054 FEB/2009
MIDLAND CONTRACTING, INC.
SYRSTAD, MICHAEL J.
PO BOX 218
HURON SD 57350-0218

Telephone # 605-352-2400
FAX # 605-352-9064

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.

Street Address	City	State	ZIP+4
39751 US Hwy 14	Huron	SD	57350
PO Box 218 (Mailing Address (Optional))	Huron	SD	57350

3. The name of the South Dakota Registered Agent Michael J. Syrstad

	City	State	ZIP+4
39751 US Hwy 14 (Street Address (Required to be a South Dakota Address))	Huron	SD	57350
PO Box 218 (Mailing Address (Optional – Required to be a South Dakota Address))	Huron	SD	57350

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.

	Street Address	City	State	ZIP+4
☑ Michael J. Syrstad, President	7080 Sunset Road	Brookings	SD	57006
☐ Brandon Syrstad, Vice President	45742 220th St	Arlington	SD	57212
☐ Rosalie Schmidt, Secretary	955 Arizona Ave SW	Huron	SD	57350
☐ Michael J. Syrstad, Treasurer	7080 Sunset Road	Brookings	SD	57006
☐ Michael J. Syrstad, Director	7080 Sunset Road	Brookings	SD	57006
☐ Director				

Dated 1-19-10

(Signature of an authorized officer)

Mike Syrstad
(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)

315 3179 03/03/2011

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 01/27/11
RECEIPT NO 211e421
RECEIVED
JAN 27 2011
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:

DB045054
DB045054 FEB/2010
MIDLAND CONTRACTING, INC.
SYRSTAD, MICHAEL J.
PO BOX 218
HURON SD 57350-0218

Telephone # 605-352-2400
FAX # 605-352-9064

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

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.

Street Address	City	State	ZIP+4
39751 US Hwy 14	Huron	SD	57350
PO Box 218 (Mailing Address (Optional))	Huron	SD	57350

4. The name of the South Dakota Registered Agent Michael J. Syrstad

Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
39751 US Hwy 14	Huron	SD	57350
PO Box 218 (Mailing Address in This State, if Different from Street Address)	Huron	SD	57350

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.

	Name	Street Address	City	State	ZIP+4
☑	Michael J. Syrstad (President)	7080 Sunset Road	Brookings	SD	57006
☐	Brandon Syrstad (Vice President)	45742 220th St	Arlington	SD	57212
☐	Rosalie Pownell (Secretary)	1658 Beach Ave SE	Huron	SD	57350
☐	Michael J Syrstad (Treasurer)	7080 Sunset Road	Brookings	SD	57006
☐	Michael J Syrstad (Director)	7080 Sunset Road	Brookings	SD	57006.
☐	(Director)				

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

Mike Syrstad
(Signature of an Authorized Person)

Mike Syrstad
(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 _____

   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 City State ZIP+4

5. If the address has changed, its new 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

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)

_____
(Printed Name)

2012 Enter Filing Year

ANNUAL REPORT

FILE DATE 02/15/2012

RECEIPT NO 23741

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:
DB045054
MIDLAND CONTRACTING, INC.
39751 US HWY 14
HURON, SD 57350

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

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

39751 US HWY 14	HURON	SD	57350
Street Address	City	State	ZIP+4
PO BOX 218	HURON	SD	57350-0218
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: MICHAEL J. SYRSTAD

39751 US HWY 14	HURON	SD	57350-4066
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 218	HURON	SD	57350-0218
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.

X	MICHAEL J SYRSTAD	7080 SUNSET ROAD	BROOKINGS	SD	57006
	President	Street Address	City	State	ZIP+4
	BRANDON SYRSTAD	45742 220TH ST	ARLINGTON	SD	57212
	Vice President	Street Address	City	State	ZIP+4
	ROSALIE POWNELL	1658 BEACH AVE SE	HURON	SD	57350
	Secretary	Street Address	City	State	ZIP+4
	MICHAEL J SYRSTAD	7080 SUNSET ROAD	BROOKINGS	SD	57006
	Treasurer	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 02/15/2012

Signature Accepted Electronically
(Signature of an Authorized Person)

MIKE SYRSTAD
(Printed Name)

2/15/2012 1:14:02PM

2013 Enter Filing Year

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: $50.00 Make check payable to SECRETARY OF STATE

FILE 1/18/2013

RECEIPT NO 88929

1. Corporate ID and Name:
DB045054
MIDLAND CONTRACTING, INC.
39751 US HWY 14
HURON, SD 57350

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

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

39751 US HWY 14	HURON	SD	57350
Street Address	City	State	ZIP+4
PO BOX 218	HURON	SD	57350-0218
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: MICHAEL J. SYRSTAD

39751 US HWY 14	HURON	SD	57350-4066
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 218	HURON	SD	57350-0218
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.

[X]	MICHAEL J SYRSTAD	7080 SUNSET ROAD	BROOKINGS	SD	57006
	President	Street Address	City	State	ZIP+4
[ ]	BRANDON SYRSTAD	45742 220TH ST	ARLINGTON	SD	57212
	Vice President	Street Address	City	State	ZIP+4
[ ]	ROSALIE POWNELL	1658 BEACH AVE SE	HURON	SD	57350
	Secretary	Street Address	City	State	ZIP+4
[ ]	MICHAEL J SYRSTAD	7080 SUNSET ROAD	BROOKINGS	SD	57006
	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.

Date 01/18/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

MICHAEL J SYRSTAD

(Printed Name)

1/18/2013 12:54:10 PM

2014 Enter Filing Year

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: $50.00 Make check payable to SECRETARY OF STATE

FILE 1/9/2014
RECEIPT NO 167312

1. Corporate ID and Name:
DB045054
MIDLAND CONTRACTING, INC.
39751 US HWY 14
HURON, SD 57350

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

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

39751 US HWY 14	HURON	SD	57350
Street Address	City	State	ZIP+4
PO BOX 218	HURON	SD	57350-0218
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: MICHAEL J. SYRSTAD

39751 US HWY 14	HURON	SD	57350-4066
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 218	HURON	SD	57350-0218
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.

[X]	MICHAEL J SYRSTAD	7080 SUNSET ROAD	BROOKINGS	SD	57006
	President	Street Address	City	State	ZIP+4
[ ]	BRANDON SYRSTAD	45742 220TH ST	ARLINGTON	SD	57212
	Vice President	Street Address	City	State	ZIP+4
[ ]	ROSALIE POWNELL	1658 BEACH AVE SE	HURON	SD	57350
	Secretary	Street Address	City	State	ZIP+4
[ ]	MICHAEL J SYRSTAD	7080 SUNSET ROAD	BROOKINGS	SD	57006
	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.

Date 01/09/2014

Signature Accepted Electronically
(Signature of an Authorized Person)
MICHAEL J SYRSTAD
(Printed Name)

1/9/2014 10:45:46 AM

2015 Enter Filing Year

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: $50.00 Make check payable to SECRETARY OF STATE

FILE DATE 12/18/2014

RECEIPT NO 255346

1. Corporate ID and Name:
DB045054
MIDLAND CONTRACTING, INC.
39751 US HWY 14
HURON, SD 57350

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

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

39751 US HWY 14	HURON	SD	57350
Street Address	City	State	ZIP+4
PO BOX 218	HURON	SD	57350-0218
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: MICHAEL J. SYRSTAD

39751 US HWY 14	HURON	SD	57350-4066
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 218	HURON	SD	57350-0218
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.

X	MICHAEL J SYRSTAD	7080 SUNSET ROAD	BROOKINGS	SD	57006
	President	Street Address	City	State	ZIP+4
	BRANDON SYRSTAD	45742 220TH ST	ARLINGTON	SD	57212
	Vice President	Street Address	City	State	ZIP+4
	ROSALIE POWNELL	1658 BEACH AVE SE	HURON	SD	57350
	Secretary	Street Address	City	State	ZIP+4
	MICHAEL J SYRSTAD	7080 SUNSET ROAD	BROOKINGS	SD	57006
	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 12/18/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

ROSALIE POWNELL

(Printed Name)

12/18/2014 9:20:21 AM

2016

Enter Filing Year

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

ANNUAL REPORT

DOMESTIC

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

FILE DATE 12/3/2015

RECEIPT NO 356105

1. Corporate ID and Name:

DB045054

MIDLAND CONTRACTING, INC.

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

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

39751 US HWY 14	HURON	SD	57350
Actual Street Address or Rural Route Box Number	City	State	ZIP+4
PO BOX 218	HURON	SD	57350-0218
Mailing Address, if Different from Street Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: MICHAEL J. SYRSTAD

39751 US HWY 14	HURON	SD	57350-4066
Actual Street Address or Rural Route Box Number in This State	City	State	ZIP+4
PO BOX 218	HURON	SD	57350-0218
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.

X	MICHAEL J SYRSTAD	7080 SUNSET ROAD	BROOKINGS	SD	57006
	President	Actual Street Address	City	State	ZIP+4
	BRANDON SYRSTAD	45742 220TH ST	ARLINGTON	SD	57212
	Vice President	Actual Street Address	City	State	ZIP+4
	ROSALIE POWNELL	1658 BEACH AVE SE	HURON	SD	57350
	Secretary	Actual Street Address	City	State	ZIP+4
	MICHAEL J SYRSTAD	7080 SUNSET ROAD	BROOKINGS	SD	57006
	Treasurer	Actual Street Address	City	State	ZIP+4

Director	Actual Street Address	City	State	ZIP+4

Director	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 12/03/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

ROSALIE POWNELL

(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.

12/3/2015 11:08:21 AM