

340 7486

Receipt Number: 1456987

File Number **DB049954**



ARTICLES_OF_INCORPORATION

For

SCOTT DOOM CONTRACTING, INC.

Filed at the request of:

**KENNETH W COTTON
WIPF & COTTON LLC
107 SOUTH MAIN STREET
WAGNER SD 57380**

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

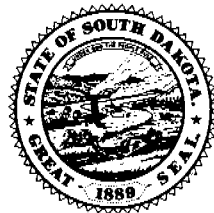
Filed in the office of the Secretary of State on: **Tuesday, July 19, 2005**



Secretary of State

Fee Received: \$125.00

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

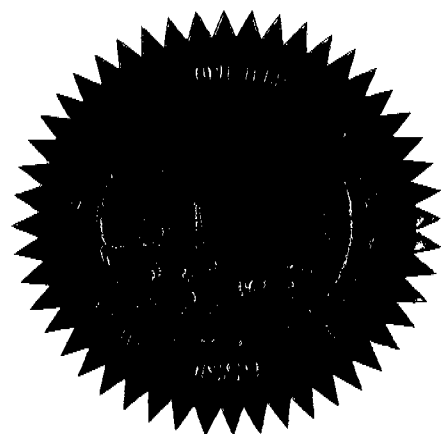
Certificate of Incorporation Business Corporation

ORGANIZATIONAL ID #: DB049954

I, **Chris Nelson**, Secretary of State of the State of South Dakota, hereby certify that the Articles of Incorporation of **SCOTT DOOM 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 July 19, 2005.



Chris Nelson
Chris Nelson
Secretary of State

Secretary of State
State Capitol
500 E. Capitol Ave.
Pierre, SD 57501
Phone 605-773-4845
Fax 605-773-4550

ARTICLES OF INCORPORATION

S.D. SEC. OF STATE

RECEIVED

JUL 19 2005

Filing Fee: \$125

Required Articles:

Article I

The name of the corporation is Scott Doom Contracting, Inc.

Article II

The number of shares the corporation is authorized to issue is 100,000. The 100,000 shares authorized to be issued by this corporation will be common stock and will have a par value of \$1.00 per share.

Article III

The complete address, or a statement that there is no street address, of its principal office is 39370 Moon Meadow Dr., Wagner, SD 57380.

Article IV

The complete address, or a statement that there is no street address, of the corporation's initial registered office, and the name of its initial registered agent at that office is Scott E. Doom, 39370 Moon Meadow Dr., Wagner, SD 57380

Article V

The name and address of each incorporator (one or more persons – persons includes an individual and an entity)

NAME

ADDRESS

Scott E. Doom

39370 Moon Meadow Dr., Wagner, SD 57380

Article VI

The number of directors of this corporation shall be not less than one (1) nor more than four (4) and the names and residences of the initial director, who shall serve until the election of his successor or successors, is, as follows:

Filed this 19th day of July, 2005
Chris Nelson
SECRETARY OF STATE

DB049954

340 7488

340 7489

Scott E. Doom
39370 Moon Meadow Driver
Wagner, SD 57380

Article VII

The purpose of this corporation is to solicit and obtain residential and commercial construction contracts, to act in the capacity as a residential and commercial contractor, managing and consulting for various entities; and further, to engage in any and all other lawful acts or activities, or businesses, in which the Company and its members may from time to time wish to participate.

To carry on any business whatsoever that this corporation may deem proper or convenient in connection with any of the foregoing purposes or otherwise, or that it may deem calculated, directly or indirectly, to improve the interests of this corporation; and to have and to exercise all powers conferred by the laws pursuant to which and under which this corporation is formed, as such laws are now in effect or may at any time hereafter be amended, and to do any and all things hereinabove set forth to the same extent and as fully as natural persons might or could do, either alone or in connection with other persons, firms, associations, or corporation, and in any part of the world.

The foregoing statement of purposes shall be construed as a statement of both purposes and powers, shall be liberally construed in aid of the powers of this corporation, and the powers and purposes stated in each clause shall, except where otherwise stated, be in nowise limited or restricted by any term or provision of any other clause, and shall be regarded not only as independent purposes, but the purposes and powers stated shall be construed distributively as such object expressed, and the enumeration as to specific powers shall not be construed as to limit in any manner the aforesaid general powers, but are in furtherance of, and in addition to and not in limitation of said general powers; to engage in any other lawful activities; and generally to institute, enter into, assist, promote, and participate in any such business or operation; and do anything which is calculated directly or indirectly to promote the interests of the corporation, or to in any way enhance the value of this corporation.

Article VIII

Section 1. Code of By-Laws: The initial Code of By-Laws of the corporation shall be adopted by its Board of Directors. The power to alter, amend, or repeal the By-Laws or to adopt a new Code of By-Laws shall be reserved to the shareholders, the affirmative votes of not less than the holders of two-thirds in number of the total number of shares issued and outstanding being necessary to exercise such reserve power. The Code of By-Laws may contain any provisions for the regulation and management of the affairs of the corporation not inconsistent with the statutes of the State of South Dakota, or these Articles of Incorporation.

Section 2. Meetings: Meetings of the shareholders and directors may be held at such place, and at such time as may be specified in the Code of By-Laws.

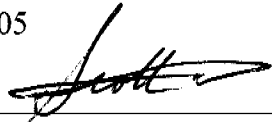
Article IX

The liability of each shareholder shall be limited to the amount remaining unpaid on his/her capital stock, if any.

Article X

No shareholder shall have the pre-emptive right to acquire additional or treasury shares of such corporation.

July 18, 2005



Scott E. Doom
President

Consent of Appointment by the Registered Agent

I, Scott E. Doom, hereby give my consent to serve as the registered agent for Scott Doom Contracting, Inc.

Dated July 18, 2005



Scott E. Doom

340 7490

2006

ANNUAL REPORT

DOMESTIC -
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 09/28/06
RECEIPT NO. 1599000

RECEIVED

SEP 13 '06

AUG 9 '06

S.D. SEC. OF STATE

S.D. SEC. OF STATE

RECEIVED

SEP 28 '06

S.D. SEC. OF STATE

Telephone # 605 491-1003
FAX # 605 389-4298

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

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



DB049954 JUL/0000
SCOTT DOOM CONTRACTING, INC.
DOOM, SCOTT E
39370 MOON MEADOW DR
WAGNER SD 57380-7133

***** 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 39370 SD Hwy 46 Wagner, SD 57380

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
<u>Scott Doom</u>	President	<u>17 Meadow Dr</u>	<u>Wagner</u>	<u>SD</u>	<u>57380</u>
<u>Lynne Doom</u>	Vice President	<u>17 Meadow Dr</u>	<u>Wagner</u>	<u>SD</u>	<u>57380</u>
<u>Lynne Doom</u>	Secretary	<u>"</u>	<u>"</u>	<u>"</u>	<u>"</u>
<u>Lynne Doom</u>	Treasurer	<u>"</u>	<u>"</u>	<u>"</u>	<u>"</u>

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 General Construction

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

NUMBER OF AUTHORIZED SHARES 100,000 CLASS SERIES

6. NUMBER OF ISSUED SHARES 125 CLASS SERIES

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

Dated 8-7-06

Signature [Signature]

Printed Name Scott Doom

Title President

253 3788

**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)

265 0800 07/31/2007

2007

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

Corporate Name, Registered Agent Name and Registered Address:

FILE DATE 07/27/07
RECEIPT NO. 1698659
RECEIVED
JUL 27 2007
S.D. SEC. OF STATE



DB049954 JUL/2006
SCOTT DOOM CONTRACTING, INC.
DOOM, SCOTT E
39370 MOON MEADOW DR
WAGNER SD 57380-7133

Telephone # _____
FAX # _____

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

★ ★ ★ ★ ATTENTION - FILING INSTRUCTIONS ★ ★ ★ ★

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

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

2. The address of the principal office 39370 SD Hwy 46 Wagner SD 57380

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
<u>Scott Doom</u>	President	<u>17 Meadow Drive</u>	<u>Wagner</u>	<u>SD</u>	<u>57380</u>
<u>Lynne Doom</u>	Vice President	<u>17 Meadow Drive</u>	<u>Wagner</u>	<u>SD</u>	<u>57380</u>
<u>↓</u>	Secretary	<u>↓</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>
<u>↓</u>	Treasurer	<u>↓</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>

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 General Contracting

5. The total number of authorized shares, itemized by class and series, if any, within each class:
NUMBER OF AUTHORIZED SHARES CLASS SERIES
100,000

6. NUMBER OF ISSUED SHARES CLASS SERIES
125

The statement may be signed by any authorized officer of the Corporation.
Dated 7/24/07

[Signature]
Signature

SCOTT DOOM
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)

278 3741 07/28/2008

2008

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	7/21/08
RECEIPT NO	1816039
RECEIVED	
JUL 21 2008	
S.D. SEC. OF STATE	

Telephone #	605 491 1003
FAX #	605 384 4298
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.	

1. Corporate Name, Registered Agent Name and Address:



DB049954 JUL/2007
SCOTT DOOM CONTRACTING, INC.
DOOM, SCOTT E
39370 MOON MEADOW DR
WAGNER SD 57380-7133

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

39370 Moon Meadow Dr. Wagner SD 57380-7133
 Street Address City State ZIP+4

Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent

Scott Doom
 39370 SD Hwy 46 Wagner SD 57380-7133
 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"/>	Scott Doom	17 Meadow Dr.	Wagner	SD	57380
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Lynae Doom				
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Lynae Doom				
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Scott Doom				
	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 6-29-08

Scott Doom
 (Signature of an authorized officer)

Scott Doom
 (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)

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: \$50 Make check payable to SECRETARY OF STATE

FILE DATE 8-27-09
RECEIVED
1944291
AUG 27 2009
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DB049954 JUL/2008
SCOTT DOOM CONTRACTING, INC.
DOOM, SCOTT E
39370 MOON MEADOW DR
WAGNER SD 57380-7133

Telephone #
FAX #
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.

39370 Moon Meadow Drive Wagner SD 57380-7133
Street Address City State ZIP+4

Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent Scott Doorn

~~39370 SD Hwy 46~~
Street Address (Required to be a South Dakota Address) City State ZIP+4

39370 Moon Meadow Drive Wagner SD 57380-7133
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.

- President: Scott Doorn, 39370 Moon Meadow Drive Wagner SD 57380-7133
Vice President: Lynne Doorn, 39370 Moon Meadow Drive Wagner SD 57380-7133
Secretary, Treasurer, Director (empty)

Dated 8/25/09

(Signature of an authorized officer)
President
(Printed Name)
Scott Doorn
(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 07/26/10
RECEIVED 2551904
JUL 26 2010
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DB049954 JUL/2009
SCOTT DOOM CONTRACTING, INC.
DOOM, SCOTT E
39370 MOON MEADOW DR
WAGNER SD 57380-7133

Telephone #
FAX #
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.

39370 Moon Meadow Drive Wagner SD 57380
Street Address City State ZIP+4

Mailing Address (Optional) City State ZIP+4

4. The name of the South Dakota Registered Agent Scott Doom

39370 Moon Meadow Dr. Wagner SD 57380
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

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.

- Scott Doom 39370 Moon Meadow Dr. Wagner SD 57380
President Street Address City State ZIP+4
Lynae Doom
Secretary Street Address City State ZIP+4
Lynae Doom
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 respect. Any violation is subject to a civil penalty.

Dated 7-23-10

(Signature of an Authorized Person)

Scott Doom
(Printed Name)

308 2940

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.

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)

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 06-09-11
RECEIPT NO 2158206
RECEIVED
JUN 09 2011
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DB049954 JUL/2010
SCOTT DOOM CONTRACTING, INC.
DOOM, SCOTT E
39370 MOON MEADOW DR
WAGNER SD 57380-7133

Telephone #

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

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

39370 Moon Meadow Dr Wagner SD 57380
Street Address City State ZIP+4
Mailing Address same City State ZIP+4
Email Address scott.d@kcinct.net

4. The name of the South Dakota Registered Agent Scott Doom

39370 Moon Meadow Drive Wagner SD 57380
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 same City State ZIP+4
Email Address

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

Table with columns: Name, Title, Street Address, City, State, ZIP+4. Includes Scott Doom (President), Lynnac Doom (Vice President, Secretary), and empty rows for Treasurer and Director.

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

Dated 6-8-11

(Signature of an Authorized Person)

Email scott.d@kcinct.net

Scott Doom
(Printed Name)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

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

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity _____

2. The name of the registered agent on file _____
(Old Registered Agent)

The name of the successor registered agent _____
(New Registered Agent)

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

4. The address of the agent currently on file for this entity (Old Registered Agent Address)

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

Mailing Address	City	State	ZIP+4
-----------------	------	-------	-------

5. If the address has changed, list the new registered agent address

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

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

Email Address _____

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

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

Dated _____

(Signature of an Authorized Person)

Email _____

(Printed Name)

2012

Enter Filing Year

ANNUAL 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 9/4/2012

RECEIPT NO 61954

1. Corporate ID and Name:

DB049954
SCOTT DOOM CONTRACTING, INC.
39370 MOON MEADOW DR
WAGNER, SD 57380-7133

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

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

39370 MOON MEADOW DR	WAGNER	SD	57380-7133
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
-----------------	------	-------	-------

4. The name of the South Dakota Registered Agent

Agent Name: SCOTT E DOOM

39370 MOON MEADOW DR	WAGNER	SD	57380-7133
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"/>	SCOTT E. DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGER	SD	57380
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	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 09/04/2012

Signature Accepted Electronically

(Signature of an Authorized Person)

SCOTT E DOOM

(Printed Name)

2013

Enter Filing Year

ANNUAL REPORT

FILE 8/3/2013

RECEIPT NO 132848

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:

DB049954
SCOTT DOOM CONTRACTING, INC.
39370 MOON MEADOW DR
WAGNER, SD 57380-7133

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

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

39370 MOON MEADOW DR	WAGNER	SD	57380-7133
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
-----------------	------	-------	-------

4. The name of the South Dakota Registered Agent

Agent Name: SCOTT E DOOM

39370 MOON MEADOW DR	WAGNER	SD	57380-7133
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"/>	SCOTT E. DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGER	SD	57380
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	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 08/03/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

SCOTT E DOOM

(Printed Name)

2014

Enter Filing Year

ANNUAL REPORT

FILE DATE 7/15/2014

RECEIPT NO 216569

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:

DB049954
SCOTT DOOM CONTRACTING, INC.
39370 MOON MEADOW DR
WAGNER, SD 57380-7133

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

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

39370 MOON MEADOW DR	WAGNER	SD	57380-7133
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: SCOTT E DOOM

39370 MOON MEADOW DR	WAGNER	SD	57380-7133
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"/>	SCOTT E. DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	DAVE N WOODS	403 2ND STREET	WAGER	SD	57380
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	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 07/15/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

SCOTT E DOOM

(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 6/30/2015

RECEIPT NO 315359

1. Corporate ID and Name:

DB049954
SCOTT DOOM CONTRACTING, INC.
39370 MOON MEADOW DR
WAGNER, SD 57380-7133

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

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

39370 MOON MEADOW DR	WAGNER	SD	57380-7133
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
-----------------	------	-------	-------

4. The name of the South Dakota Registered Agent

Agent Name: SCOTT E DOOM

39370 MOON MEADOW DR	WAGNER	SD	57380-7133
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"/>	SCOTT E. DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	DAVE N WOODS	403 2ND STREET	WAGER	SD	57380
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	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 06/30/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

SCOTT E DOOM

(Printed Name)

2016

ANNUAL REPORT

FILE DATE 6/2/2016

Enter Filing Year

DOMESTIC CORPORATION

RECEIPT NO 422023

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

SDCL 59-11-24, 24.1

Please Type or Print Clearly In Ink

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

1. Corporate ID and Name:

DB049954

Enter Corporate ID

SCOTT DOOM CONTRACTING, 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).

39370 MOON MEADOW DR

WAGNER

SD

57380-7133

Actual Street Address or Rural Route Box Number

City

State

ZIP+4

Mailing Address, if Different from Street Address

City

State

ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: SCOTT E DOOM

39370 MOON MEADOW DR

WAGNER

SD

57380-7133

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"/>	SCOTT E. DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	President	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	DAVE N WOODS	403 2ND STREET	WAGER	SD	57380
	Vice President	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	Secretary	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	LYNNE M DOOM	39370 MOON MEADOW DRIVE	WAGNER	SD	57380
	Treasurer	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>					
	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 (SDCL 47-1A-129).

Dated

Signature Accepted Electronically

(Signature of an Authorized Person)

SCOTT E DOOM

(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.

6/2/2016 8:45:18 AM