

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

Certificate of Organization Domestic LLC

ORGANIZATIONAL ID# DL035609

I, Jason Gant, Secretary of State of the State of South Dakota, hereby certify that the Articles of Organization of

J.E.L. Trucking, 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 10/29/2013.

Jason M. Gant
Secretary of State

11/6/2013 10:02:32 AM

Change ID: 2139

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

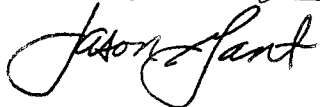
FILING FEE: \$150 payable to SECRETARY OF STATE

RECEIVED

OCT 29 2013

S.D. SEC. OF STATE

Filed this 29th day of Oct, 2013



SECRETARY OF STATE

Telephone # _____

FAX # _____

Article I

The name of the company is J.E.L. Trucking, 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.

758 Simmons Ave. SE	Huron	SD	57350
Street Address	City	State	ZIP+4

Mailing Address (Optional)	City	State	ZIP+4
----------------------------	------	-------	-------

Article IV

The South Dakota Registered Agent name Corporation Service Company

503 South Pierre Street	Pierre	SD	57501
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
--	------	-------	-------

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

FB014109

Article V

The name and address of each organizer

Amanda J. Beren	340 N. Westlake Blvd., Ste 210	Westlake Village	CA	91362
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 10/21/2013

AJB
(Signature of an organizer)

Amanda J. Beren
(Printed Name)

Organizer
(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

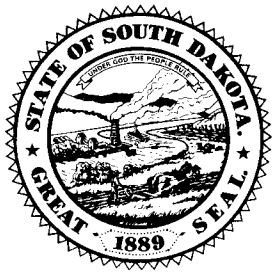
(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

(Title)



Secretary of State

Jason M. Gant

State Capitol | 500 East Capitol Avenue | Pierre, South Dakota 57501 | sdsos@state.sd.us | sdsos.gov

Return To: CORPNET, INCORPORATED
340 N WESTLAKE BLVD. STE 210
WESTLAKE VILLAGE, CA 91362

From: Secretary of State Jason M. Gant
Corporations Division

Filing Date: 10/29/2013

Re: J.E.L. Trucking, LLC (DL035609)
Articles of Organization

The documents on behalf of J.E.L. Trucking, 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
CORPNET, INCORPORATED	340 N WESTLAKE BLVD. STE 210 WESTLAKE VILLAGE, CA 91362	\$150.00
Total:		\$150.00

Description	Invoice Date	Qty	Receipt #	Subtotal
Articles of Organization	11/06/2013	1	151411	\$150.00
Total:				\$150.00

Administration
Tel: (605) 773-3537
Fax: (605) 773-6580

Corporations
Tel: (605) 773-4845
Fax: (605) 773-4550

Uniform Commercial Code
Tel: (605) 773-4422
Fax: (605) 773-4550

2014

Enter Filing Year

ANNUAL REPORT

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

DOMESTIC LLC

Please Type or Print Clearly In Ink

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

FILE DATE 9/30/2014

RECEIPT NO 235430

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

DL035609
J.E.L. Trucking, LLC
758 SIMMONS AVE. SE
HURON, SD 57350

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

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

758 SIMMONS AVE. SE	HURON	SD	57350
Street Address	City	State	ZIP+4
			340 N. Wes
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: CORPORATION SERVICE COMPANY

503 SOUTH PIERRE STREET	PIERRE	SD	57501
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 business addresses of its managers. If the L.L.C. is member-managed, the names and addresses of the members need not be set forth.

☐ JOHN M. WENZEL	758 SIMMONS AVE. SE	HURON	SD	57350
Manager	Street Address	City	State	ZIP+4
☐ LACHELE A. WENZEL	758 SIMMONS AVE. SE	HURON	SD	57350
Manager	Street Address	City	State	ZIP+4

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

Dated 09/30/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

AMANDA J. BEREN

(Printed Name)

2014

Enter Filing Year

AMENDED ANNUAL REPORT

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

DOMESTIC LLC

Please Type or Print Clearly In Ink

Make check payable to SECRETARY OF STATE

FILE DATE 11/12/2014

RECEIPT NO 246027

FILING FEE:

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

DL035609
J.E.L. Trucking, LLC
758 SIMMONS AVE. SE
HURON, SD 57350

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

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

758 SIMMONS AVE. SE	HURON	SD	57350
Street Address	City	State	ZIP+4
			340 N. Wes
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: CORPORATION SERVICE COMPANY

503 SOUTH PIERRE STREET	PIERRE	SD	57501
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 business addresses of its managers. If the L.L.C. is member-managed, the names and addresses of the members need not be set forth.

☐ JOHN M. WENZEL	758 SIMMONS AVE. SE	HURON	SD	57350
Manager	Street Address	City	State	ZIP+4

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

Dated 11/12/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

AMANDA J BEREN

(Printed Name)

2014

STATEMENT OF CHANGE OF REGISTERED OFFICE

Enter Filing Year

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

DOMESTIC LLC

SDCL 47-34A-211

Please Type or Print Clearly In Ink

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

FILE DATE 10/14/2015

RECEIPT NO 343244

Telephone #

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

DL035609

J.E.L. Trucking, LLC

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

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

Agent Name: CORPORATION SERVICE COMPANY

503 SOUTH PIERRE STREET

PIERRE

SD

57501

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

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

New Agent Name: REGISTERED AGENTS INC

400 N MAIN AVE STE 206

SIOUX FALLS

SD

57104

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

Email Address (Optional)

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

Dated 10/14/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

Email

AMANDA BEREN

(Optional)

(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.

10/14/2015 12:44:53 PM

2015

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

Please Type or Print Clearly In Ink

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

FILE DATE 12/4/2015

RECEIPT NO 356377

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

DL035609

J.E.L. Trucking, LLC

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

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

758 SIMMONS AVE. SE	HURON	SD	57350
Actual Street Address or Rural Route Box Number	City	State	ZIP+4
			340 N. Wes
Mailing Address, if Different from Street Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: REGISTERED AGENTS INC

400 N MAIN AVE STE 206	SIOUX FALLS	SD	57104
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 addresses of its managers (governors). If the LLC is member-managed, the names and addresses of the members (governors) need not be set forth.

☐ JOHN M. WENZEL	758 SIMMONS AVE. SE	HURON	SD	57350
Manager	Actual Street Address	City	State	ZIP+4
☐ LACHELE A. WENZEL	758 SIMMONS AVE. SE	HURON	SD	57350
Manager	Actual Street Address	City	State	ZIP+4

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

Dated 12/04/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

AMANDA J BEREN

(Printed Name)

2016

Enter Filing Year

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

ANNUAL REPORT

DOMESTIC LLC

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

Please Type or Print Clearly In Ink

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

FILE DATE 9/29/2016

RECEIPT NO 459902

1. LLC ID and Name:

DL035609

Enter LLC ID

J.E.L. Trucking, 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).

758 SIMMONS AVE. SE

HURON

SD

57350

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: REGISTERED AGENTS INC

400 N MAIN AVE STE 206

SIOUX FALLS

SD

Actual Street Address or Rural Route Box Number in This State

City

State

ZIP+4

Mailing Address in This State, if Different from Street Address

City

State

ZIP+4

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

☐

JOHN M. WENZEL

758 SIMMONS AVE. SE

HURON

SD

57350

Manager

Actual Street Address

City

State

ZIP+4

☐

LACHELE A. WENZEL

758 SIMMONS AVE. SE

HURON

SD

57350

Manager

Actual Street Address

City

State

ZIP+4

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

Dated 09/29/2016

Signature Accepted Electronically

(Signature of an Authorized Person)

AMANDA J BEREN

(Printed Name)

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

9/29/2016 4:03:19 PM