

370 5320

Receipt Number: 1961229

File Number **DL020032**



DL020032



ARTICLES OF ORGANIZATION

ARTICLES_OF_ORGANIZATION

For

DORN ENTERPRISES, L.L.C.

Filed at the request of:

NESSON LAW OFFICE PC
STEVEN NESSON
PO Box 2117
Sioux Falls SD 57104

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

Filed in the office of the Secretary of State on: **Monday, October 26, 2009**

Secretary of State

Fee Received: \$150.00

370.5321 10/27/2009
© GOES 340

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

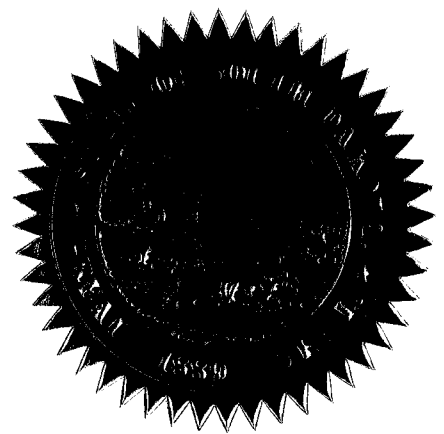
Certificate of Organization Limited Liability Company

ORGANIZATIONAL ID #: DL020032

I, Chris Nelson, Secretary of State of the State of South Dakota, hereby certify that the Articles of Organization of **DORN ENTERPRISES, L.L.C.** duly signed and verified, pursuant to the provisions of the South Dakota Limited Liability Company 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 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 October 26, 2009.



Chris Nelson
Chris Nelson
Secretary of State

370 5322

Filed this 26th day of Oct 2009
Chi Nelson
SECRETARY OF STATE

ARTICLES OF ORGANIZATION
OF
DORN ENTERPRISES, L.L.C.
A
DOMESTIC LIMITED LIABILITY COMPANY

RECEIVED
OCT 26 2009
S.D. SEC. OF STATE

I the undersigned, being the organizer of Dorn Enterprises, L.L.C., a South Dakota limited liability company now in formation hereby adopt the following Articles of Organization for said Company, pursuant to SDCL §47-34A.

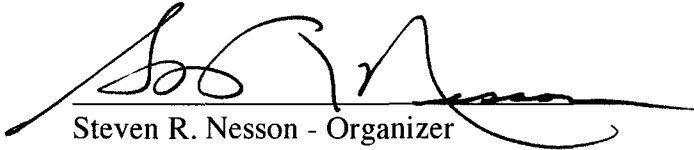
1. The name of the limited liability company shall be **Dorn Enterprises, L.L.C.**
2. The address of the initial designated office of the Limited Liability Company shall be 24595 Lindy Avenue, Dell Rapids, South Dakota, 57022.
3. The name and street address of the initial agent for service of process shall be Steven R. Nesson, 141 North Main Avenue, Ste 504, Sioux Falls, SD, 57104.
4. The purpose for which this limited liability company is formed is to engage in the owning and operating of a business engaged in the ownership and rental of commercial and residential real estate, together with such other related activities, and further to make and execute any and all agreements for the purposes outlined, including agreements for the borrowing of money, and to do all other things subsidiary, necessary, or contingent for the carrying-out and to effect the main purposes of the Company and to enter into partnerships and to accomplish all other lawful purposes for which Companies may be organized under this Act.
5. The period of duration of this limited liability company shall be 30 years.
6. The total amount of cash and other equity to be initially contributed shall be a total of Four Hundred Thousand Dollars (\$5,000.00).
7. Additional contributions may be required in the future at a time and in such amount as a majority vote of the members shall designate. Members shall not be liable for debts and obligations under SDCL 47-34A-303(c).
8. The management of this limited liability company shall be undertaken by the members, the names and addresses of whom are as follows:

Corale Dorn
24595 Lindy Avenue
Dell Rapids, SD 57022

Dan Dorn
24595 Lindy Avenue
Dell Rapids, SD 57022

RL 2003d

Executed in Duplicate at Sioux Falls, South Dakota, this 22nd day of October, 2009.



Steven R. Nesson - Organizer

State of South Dakota)

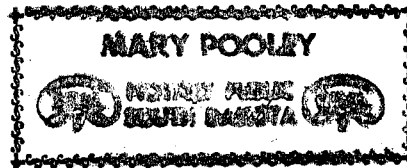
: ss.

County of Minnehaha)

I, Mary Pooley, a Notary Public, hereby certify that on the 22nd day of October, 2009, personally appeared before me Steven R. Nesson, who being by me first duly sworn, declared that he is the person who signed the foregoing document as Organizer, and that the statements therein contained are true.


Notary Public - South Dakota
(SEAL)

My Commission Expires: 5-26-11



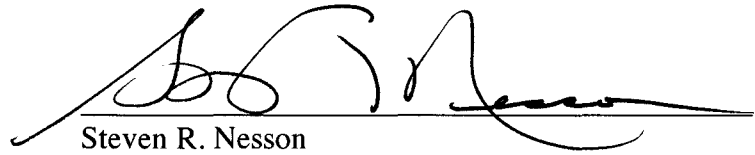
370 5324

370 5325

WRITTEN CONSENT OF REGISTERED AGENT

I, Steven R. Nesson, hereby consent to act as registered agent of **Dorn Enterprises, L.L.C.**

Dated at Sioux Falls, South Dakota, this 22 day of October, 2009.



Steven R. Nesson

310 2581 09/21/2010

2010

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

ANNUAL REPORT
DOMESTIC L.L.C.

Please Type or Print Clearly in Ink

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

FILE DATE 10/01/10
 RECEIPT NO. 2367652
RECEIVED
SEP 16 2010
S.D. SEC. OF STATE

1. L.L.C. Name, Registered Agent Name and Address:



DL020032
DL020032 OCT/0000
DORN ENTERPRISES, L.L.C.
NESSON, STEVEN R.
141 NORTH MAIN AVENUE
STE 504
SIOUX FALLS SD 57104-6435

Telephone # _____
FAX # _____
FILING DATE: Due during the month the Certificate of Organization 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

24595 Lindy Ave. Dell Rapids SD 57022
Street Address City State ZIP+4

Mailing Address (Optional) City State ZIP+4

4. The name of the South Dakota Registered Agent Steven R. Nesson

141 N. Main Ave. Sioux Falls SD 57104
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 managers. If the L.L.C. is member-managed the names and addresses of the members need not be set forth.

Manager Street Address City State ZIP+4

Manager Street Address City State ZIP+4

Manager 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 September 14, 2010

(Signature of an Authorized Person)

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

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
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Mailing Address (Optional – Required to be a South Dakota Address)	City	State	ZIP+4
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6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

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

Enter Filing Year

ANNUAL REPORT DOMESTIC L.L.C.

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	10/6/11
RECEIPT NO	2189508
RECEIVED	
OCT 06 2011	
S.D. SEC. OF STATE	

Telephone #	_____
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325 1461 10/06/2011

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

DL020032
Dorn Enterprises, L.L.C.
Nesson, Steven R.
141 North Main Ave., Ste. 504
Sioux Falls, SD 57104-6435

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

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

24595 Lindy Ave.	Dell Rapids	SD	57022
Street Address	City	State	ZIP+4
Mailing Address	City	State	ZIP+4
Email Address			

4. The name of the South Dakota Registered Agent Steven R. Nesson

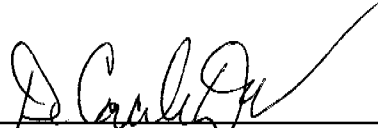
141 N. Main Ave.	Sioux Falls	SD	57104
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4
Email Address			

5. The names and addresses of its managers. If the L.L.C. is member-managed, the names and addresses of the members need not be set forth.

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

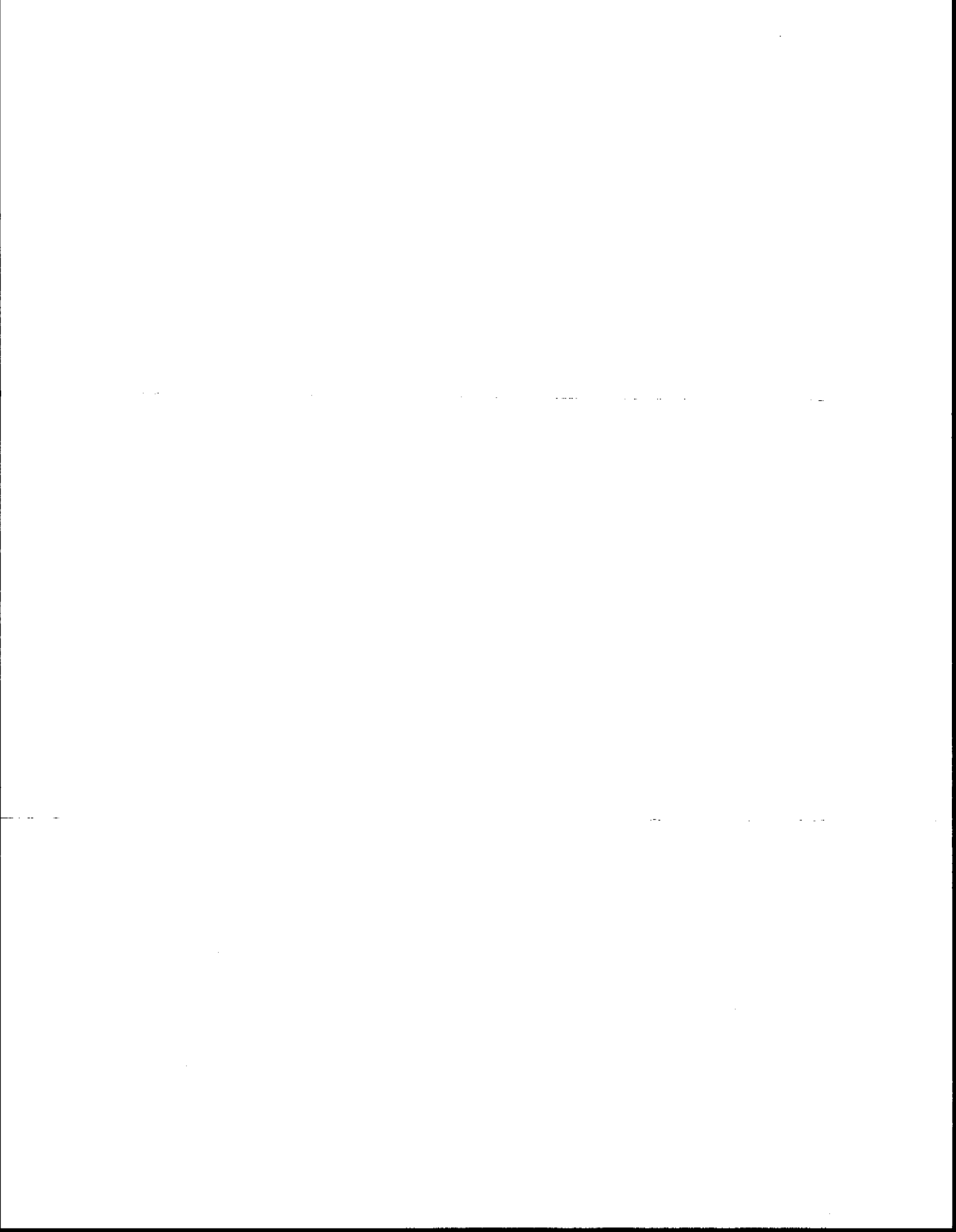
Dated 4 Oct 2011


(Signature of an Authorized Person)

Email _____

Corale Dorn Dr Corale M Dorn
(Printed Name)

*By signing this form you agree to have both the fee and the form processed electronically.



2012

Enter Filing Year

ANNUAL REPORT

FILE 10/3/2012

RECEIPT NO 67283

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

1. L.L.C. ID and Name:
DL020032
DORN ENTERPRISES, L.L.C.
24595 LINDY AVENUE
DELL RAPIDS, SD 57022-5248

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

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

24595 LINDY AVENUE DELL RAPIDS SD 57022-5248
Street Address City State ZIP+4

Mailing Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: STEVEN R. NESSON

141 NORTH MAIN AVENUE SIOUX FALLS SD 57104-6435
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.

<input type="checkbox"/>	Manager	Street Address	City	State	ZIP+4
<input type="checkbox"/>	Manager	Street Address	City	State	ZIP+4
<input type="checkbox"/>	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.

Date 10/03/2012

Signature Accepted Electronically

(Signature of an Authorized Person)
DR. CORALE M DORN

(Printed Name)

2012

Enter Filing Year

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

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: \$10.00 Make check payable to SECRETARY OF STATE

FILE 5/3/2013

RECEIPT NO 114071

1. L.L.C. ID and Name:
DL020032
DORN ENTERPRISES, L.L.C.
24595 LINDY AVENUE
DELL RAPIDS, SD 57022-5248

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: STEVEN R. NESSON

141 NORTH MAIN AVENUE	SIOUX FALLS	SD	57104-6435
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
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4. If the address has changed, its new address.

New Agent Name: DAN DORN

24595 LINDY AVE	DELL RAPIDS	SD	57022
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
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No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty. By signing this form you agree to have both the fee and the form processed electronically.

Date 05/03/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

DANIEL J DORN

(Printed Name)

2013

Enter Filing Year

ANNUAL REPORT

FILE 11/19/2013

RECEIPT NO 153838

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

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

DL020032
DORN ENTERPRISES, L.L.C.
24595 LINDY AVENUE
DELL RAPIDS, SD 57022-5248

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

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

24595 LINDY AVENUE DELL RAPIDS SD 57022-5248
Street Address City State ZIP+4

Mailing Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: DAN DORN

24595 LINDY AVE DELL RAPIDS SD 57022
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.

Table with 5 columns: Manager, Street Address, City, State, ZIP+4. Contains three empty rows for manager information.

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 11/19/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

MILES F SCHUMACHER

(Printed Name)

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 11/12/2014

RECEIPT NO 246036

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

DL020032
DORN ENTERPRISES, L.L.C.
24595 LINDY AVENUE
DELL RAPIDS, SD 57022-5248

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

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

24595 LINDY AVENUE DELL RAPIDS SD 57022-5248
Street Address City State ZIP+4

Mailing Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: DAN DORN

24595 LINDY AVE DELL RAPIDS SD 57022
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.

Manager Street Address City State ZIP+4

Manager Street Address City State ZIP+4

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)

MILES F SCHUMACHER

(Printed Name)

2015

ANNUAL REPORT

FILE DATE 11/18/2015

Enter Filing Year

DOMESTIC LLC

RECEIPT NO 352244

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

SDCL 47-34A-211

Please Type or Print Clearly In Ink

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

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

DL020032

DORN ENTERPRISES, L.L.C.

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

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

24595 LINDY AVENUE DELL RAPIDS SD 57022-5248

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: DAN DORN

24595 LINDY AVE DELL RAPIDS SD 57022

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.

Manager Actual Street Address City State ZIP+4

Manager Actual Street Address City State ZIP+4

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 11/18/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

MILES F SCHUMACHER

(Printed Name)