

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF INCORPORATION

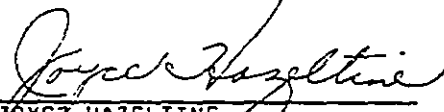
BUSINESS CORPORATION

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, hereby certify that the Articles of Incorporation of DDT FARMS, 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 issued this Certificate of Incorporation and attach hereto a duplicate of the Articles of Incorporation of DDT FARMS, INC.

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 September 27, 1993.




JOYCE HAZELTINE
Secretary of State

RECEIVED
SEP 27 1993

ARTICLES OF INCORPORATION
OF
DDT FARMS, INC.

We, the undersigned, for the purpose of forming a corporation under and pursuant to the provisions of Chapter 47-2 SDCL and laws amendatory thereof and supplementary thereto, and for the purposes expressed in Article III hereof, do hereby organize ourselves as a body corporate and adopt the following Articles of Incorporation.

ARTICLE I.

The name of the corporation shall be DDT FARMS, INC.

ARTICLE II.

The duration of the corporation shall be perpetual.

ARTICLE III.

The general purpose and nature of the Corporation's business shall be to own, manage, lease and operate farm lands and other enterprises calculated or designed to be profitable to this Corporation and in conformity with the laws of the State of South Dakota, and, further in conformity with the laws of any state wherein said Corporation is licensed to do business;

To generally engage in, do and perform any enterprise, act, or vocation that a natural person might or could do or perform;

To facilitate these purposes the Corporation shall have any and all powers of every kind and nature whatsoever as are enumerated in Title 47 1967 SDCL and all acts amendatory thereto.

The foregoing powers are not limitations upon the Corporation; and the Corporation may engage in any legal endeavor as allowed by the laws of the State of South Dakota, laws of the United States, and the laws of any state in which the Corporation does business.

ARTICLE IV.

The total number of authorized shares of the Corporation shall be Twenty-five Thousand (25,000) shares of a par value of One Dollar (\$1.00) each, and each, and all of such shares shall be designated common shares. There shall be no other classes or series of shares and there shall be no series within the shares hereby authorized. There shall be no preferences, limitation, or designations of the common shares hereby authorized.

Filed this 27th day of
Sept. 1993
C. Green
SECRETARY OF STATE

S O U T H D A K O T A

ARTICLE V.

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 of common stock.

ARTICLE VI.

The location and post office of the registered office of the Corporation in South Dakota shall be HCR 1, Box 70, Roscoe, SD 57471; and the name of its initial registered agent at such address is Julius Schneider.

ARTICLE VII.

The number of directors constituting the initial Board of Directors is two and the names and post office addresses of the first Directors of the corporation is:

Julius Schneider	HCR 1, Box 70 Roscoe, SD 57471
Dorothy Schneider	HCR 1, Box 70 Roscoe, SD 57471

The term of office of said director shall be until the first annual meeting of the shareholders, or until his successor is elected and qualified.

ARTICLE VIII.


The name and post office address of the incorporator is:

Julius Schneider	HCR 1, Box 70 Roscoe, SD 57471
Dorothy Schneider	HCR 1, Box 70 Roscoe, SD 57471

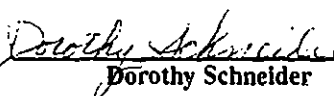
ARTICLE IX.

These Articles may be amended pursuant to applicable South Dakota law.

IN WITNESS WHEREOF, I have hereunto set my hand this 24th day of September, 1993.



Julius Schneider



Dorothy Schneider

Receipt No. 338767

File No. DB033457

Filed at Request of

THURON CUTLER & BATTEN
BRUCE CUTLER
PO BOX 99
ABERDEEN SD 57402

ART OF INC
OF

DDT FARMS, INC.

25,000 @ \$1.00

State of South Dakota

Office of Secretary of State

ss

Filed in the office of the Secretary of State on
the 27th day of SEPT 19 93

Joseph Magelton

Secretary of State

By _____
Deputy

Fee Received \$10

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

FARM

CERTIFICATE OF AUTHORIZATION

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, hereby certify that the report of DDT FARMS, INC. required by SDCL 47-9A-16 and 47-9A-17 of the Family Farm Act of 1974 has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I hereby issued this Farm Certificate of Authorization to DDT FARMS, INC.



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 25, 1993.

JOYCE HAZELTINE
Secretary of State

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5027
605-773-4845

Filed this

25th day of
OCT 93

QUALIFICATION
FOR FAMILY FARM CORPORATION
AND AUTHORIZED FARM CORPORATION

RECEIVED

OCT 13 1993

No Filing Fee

Secretary of State

Pursuant to the provisions of the Family Farm Act of 1974, SDCL 47-9A the following report is filed in order to qualify to engage in farming as defined under the terms of said Act.

RECEIVED

OCT 25 1993

- 1 The name of the corporation is DDT FARMS, INC.
- 2 The state of its incorporation is SOUTH DAKOTA
- 3 The address of the registered office and the name of the registered agent in South Dakota is JULIUS SCHNEIDER
HCR 1, BOX 70 ROSCOE SOUTH DAKOTA Zip+4 57471
- 4 If a foreign corporation, the address of its principal office or registered office in its state of incorporation is _____
Zip+4 _____
- 5 List the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation and used for the growing of crops or the keeping or feeding of poultry or livestock:
- SW: 30-124-70, Edmunds County, SD 144.70 acres

6. The names and addresses of the officers and the board of directors: (Both officers and directors are to be listed even though they may be the same.)

President JULIUS SCHNEIDER HCR 1, BOX 70 ROSCOE, SOUTH DAKOTA 57471

Vice President DOROTHY SCHNEIDER HCR 1, BOX 70 ROSCOE, SOUTH DAKOTA 57471

Secretary DOROTHY SCHNEIDER HCR 1, BOX 70 ROSCOE, SOUTH DAKOTA 57471

Treasurer DOROTHY SCHNEIDER HCR 1, BOX 70 ROSCOE, SOUTH DAKOTA 57471

Director JULIUS SCHNEIDER HCR 1, BOX 70 ROSCOE, SOUTH DAKOTA 57471

Director DOROTHY SCHNEIDER HCR 1, BOX 70 ROSCOE, SOUTH DAKOTA 57471

Director _____

7. Please check which applies to this corporation.

FAMILY FARM CORPORATION AUTHORIZED FARM CORPORATION _____

- (A) Applies to a FAMILY FARM CORPORATION. (SDCL 47-9A-14) The number of shares owned by person(s) residing on the farm or actively engaged in farming, or their relatives within the third degree of kindred, or who has resided on or has actively operated the farm is 1000 (100%). Degree of kindred is defined as the number of generations with each generation being a degree (SDCL 29-1-10),

OR

The number of shares owned by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is _____

- (B) Applies only to AUTHORIZED FARM CORPORATION. (SDCL 47-9A-15) The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is _____ % (Must not exceed 20% of its gross receipts).

(C) The name, address and number of shares owned by each shareholder:

Name	Address	Degree of Kindred	Number of Shares
JULIUS SCHNEIDER	HCR 1, BOX 70 ROSCOE, SD 57471	Spouse	500
DOROTHY SCHNEIDER	HCR 1, BOX 70 ROSCOE, SD 57471	Spouse	500
		(Total)	1000

Dated 10/5/ 19 93

Corporation DDT FARMS, INC.
Signature X Julius Schneider
Title of Officer PRESIDENT

STATE OF SOUTH DAKOTA
COUNTY OF BROWN ss.

I, BRUCE CUTLER a notary public, hereby certify that on the 5th day of OCTOBER, 19 93 personally appeared before me JULIUS SCHNEIDER who being by me first duly sworn, declared that she/he is the PRESIDENT of DDT FARMS, INC. that she/he signed the foregoing document as officer

of the corporation, and that the statements there in contained are true.
My Commission Expires 8-25-99 Notary Public Bruce Cutler

Notarial Seal

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

Filed this 25th day of October 1993

QUALIFICATION
FOR FAMILY FARM CORPORATION
AND AUTHORIZED FARM CORPORATION

RECEIVED
OCT 13 1993

No Filing Fee

Secretary of State

James H. Hartzline
SECRETARY OF STATE

Pursuant to the provisions of the Family Farm Act of 1974, SDCL 47-9A the following report is filed in order to qualify to engage in farming as defined under the terms of said Act.

RECEIVED
OCT 20 1993

1. The name of the corporation is DDT FARMS, INC.
2. The state of its incorporation is SOUTH DAKOTA
3. The address of the registered office and the name of the registered agent in South Dakota is JULIUS SCHNEIDER
HCR 1, BOX 70 ROSCOE SOUTH DAKOTA Zip+4 57471
4. If a foreign corporation, the address of its principal office or registered office in its state of incorporation is _____ Zip+4 _____
5. List the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation and used for the growing of crops or the keeping or feeding of poultry or livestock:

SW 30-124-70, Edmunds County, SD 144.70 acres

6. The names and addresses of the officers and the board of directors: (Both officers and directors are to be listed even though they may be the same.)
- | | | | | |
|----------------|--------------------------|----------------------|-----------------------------|--------------|
| President | <u>JULIUS SCHNEIDER</u> | <u>HCR 1, BOX 70</u> | <u>ROSCOE, SOUTH DAKOTA</u> | <u>57471</u> |
| Vice President | <u>DOROTHY SCHNEIDER</u> | <u>HCR 1, BOX 70</u> | <u>ROSCOE, SOUTH DAKOTA</u> | <u>57471</u> |
| Secretary | <u>DOROTHY SCHNEIDER</u> | <u>HCR 1, BOX 70</u> | <u>ROSCOE, SOUTH DAKOTA</u> | <u>57471</u> |
| Treasurer | <u>DOROTHY SCHNEIDER</u> | <u>HCR 1, BOX 70</u> | <u>ROSCOE, SOUTH DAKOTA</u> | <u>57471</u> |
| Director | <u>JULIUS SCHNEIDER</u> | <u>HCR 1, BOX 70</u> | <u>ROSCOE, SOUTH DAKOTA</u> | <u>57471</u> |
| Director | <u>DOROTHY SCHNEIDER</u> | <u>HCR 1, BOX 70</u> | <u>ROSCOE, SOUTH DAKOTA</u> | <u>57471</u> |
| Director | | | | |

7. Please check which applies to this corporation.
FAMILY FARM CORPORATION AUTHORIZED FARM CORPORATION _____

(A) Applies to a FAMILY FARM CORPORATION. (SDCL 47-9A-14) The number of shares owned by person(s) residing on the farm or actively engaged in farming, or their relatives within the third degree of kindred, or who has resided on or has actively operated the farm is 1000 (100%). Degree of kindred is defined as the number of generations with each generation being a degree (SDCL 29-1-10).

OR

The number of shares owned by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is _____.

(B) Applies only to AUTHORIZED FARM CORPORATION. (SDCL 47-9A-15) The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is _____ % (Must not exceed 20% of its gross receipts).

Receipt No.

Filed at Request of

File No. DF033457

THURLOW CUTLER & BATTEN
PO BOX 99
ABERDEEN SD 57402

FARM QUAL
OF

DDT FARMS, INC.

State of South Dakota

ss.

Office of Secretary of State

Filed in the office of the Secretary of State on

the 25th day of OCT 19 93

Raycel Magelstine

Secretary of State

By _____ Deputy

Fee Received

no charge

SOS CRP 491 4/81

U.S. GOVERNMENT PRINTING OFFICE: 1985 O-334-57

1995 03 03 09:35
Secretary of State

State Capitol, Ste 204
500 East Capitol Avenue
Pierre, South Dakota
57501-5070



JOYCE HAZELTINE
Secretary of State

TOM LECKEY
Deputy

March 3, 1995

DF-033457
DDI FARMS, INC.
SCHNEIDER, JULIUS
MCB 1 BOX 70
MOSCUE, SD 57471-9360

DOMESTIC BUSINESS
NOTICE OF ADMINISTRATIVE DISSOLUTION

This is notification to you as the registered agent of record, that the above named corporation is delinquent in filing the annual report as required by SDCL 47-9-1. South Dakota law states that a corporation may be Administratively Dissolved for failure to file the report within sixty days after it is due. Pursuant to SDCL 47-7-29.1 the corporation will be Administratively Dissolved if the report is not filed with our office prior to May 15, 1995.

The delinquent report along with the \$60 fee will need to be filed **PRIOR to May 15th** to avoid administrative dissolution. The annual report form was previously mailed to you, but additional forms may be obtained by contacting the Secretary of State's Office, Corporate Division, 500 E. Capitol, Pierre, SD 57501, or by calling 773-4845.

If the annual report was submitted to our office and we returned it for further information, please promptly return it for final filing to bring the corporation into good standing.

Administration
605 773 3537
Fax: 605 773 4550

Corporations
605 773 4845
605 773 4550

Uniform Commercial Code
605 773 4422
605 773 4550

Telecommunications
for Deaf
605 773 5010

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF ADMINISTRATIVE DISSOLUTION

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, by virtue of the authority vested in me by SDCL 47-7-30.1 hereby Administratively Dissolve the below named corporation for failure to file the corporate annual report when due.

DF-03J457
DOT FARMS, INC.
SCHNEIDER, JULIUS
MCB 1 BOX 70
ROSCOE, SD 57471-0360

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 1st day of June, 1995.


JOYCE HAZELTINE
Secretary of State



SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL AVE.
PIERRE, S.D. 57501
(605)773-4845
Fax (605)773-4550

90
ANNUAL REPORT
DOMESTIC CORPORATION
PLEASE TYPE OR USE BLACK INK

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

FILE DATE _____
RECEIPT NO. _____
RECEIVED RECEIVED
03 03 1999 JAN 25 1999

1. Corporate Name, Registered Agent and Registered Address:

DP033457
DDT FARMS, INC.
SCHNEIDER, JULIUS
BCR 1 BOX 70
ROSCOE, SD 57471-9560

9/96

Telephone # _____
FAX # _____
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 _____

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
_____	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 JANUARY 19, 19 99

Debra Roersch
(Signature)

STATE OF SOUTH DAKOTA
COUNTY OF BROWN

PRESIDENT
(Title)

I, JOHN C. TRIPLE, a notary public, do hereby certify that on this 19 day of JANUARY, 19 99, personally appeared before me DEBRA ROESCH who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARMS, INC that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

APRIL 27, 2005
My Commission Expires

John C. Triple
(Notary Public)

(Notarial Seal)

dbar.pdf

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

96
ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
NO FILING FEE

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

FILE DATE _____
FILE NO. _____

RECEIVED RECEIVED

FEB 03 1999 JAN 25 1999

S.D. SEC. OF STATE S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report.

1. The name of the corporation is FARMING

The state of incorporation is SOUTH DAKOTA

2. The name of the registered agent in South Dakota and the registered office address is DEBRA ROESCH

12884 342ND AVE ROSCOE SD Zip + 4 57471

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

5. List only the changes of the names or addresses of the officers and directors.

NAME

REPLACED

AS OFFICER OR DIRECTOR

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7 List changes only of names, address and number of shares owned by shareholders

NAME

ADDRESS

NUMBER OF SHARES

DEGREE OF KINDRED

B. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated JANUARY 19 19 99

By Debra Roesch

(Signature)

Its PRESIDENT

(Title)

STATE OF SOUTH DAKOTA
COUNTY OF BROWN ss

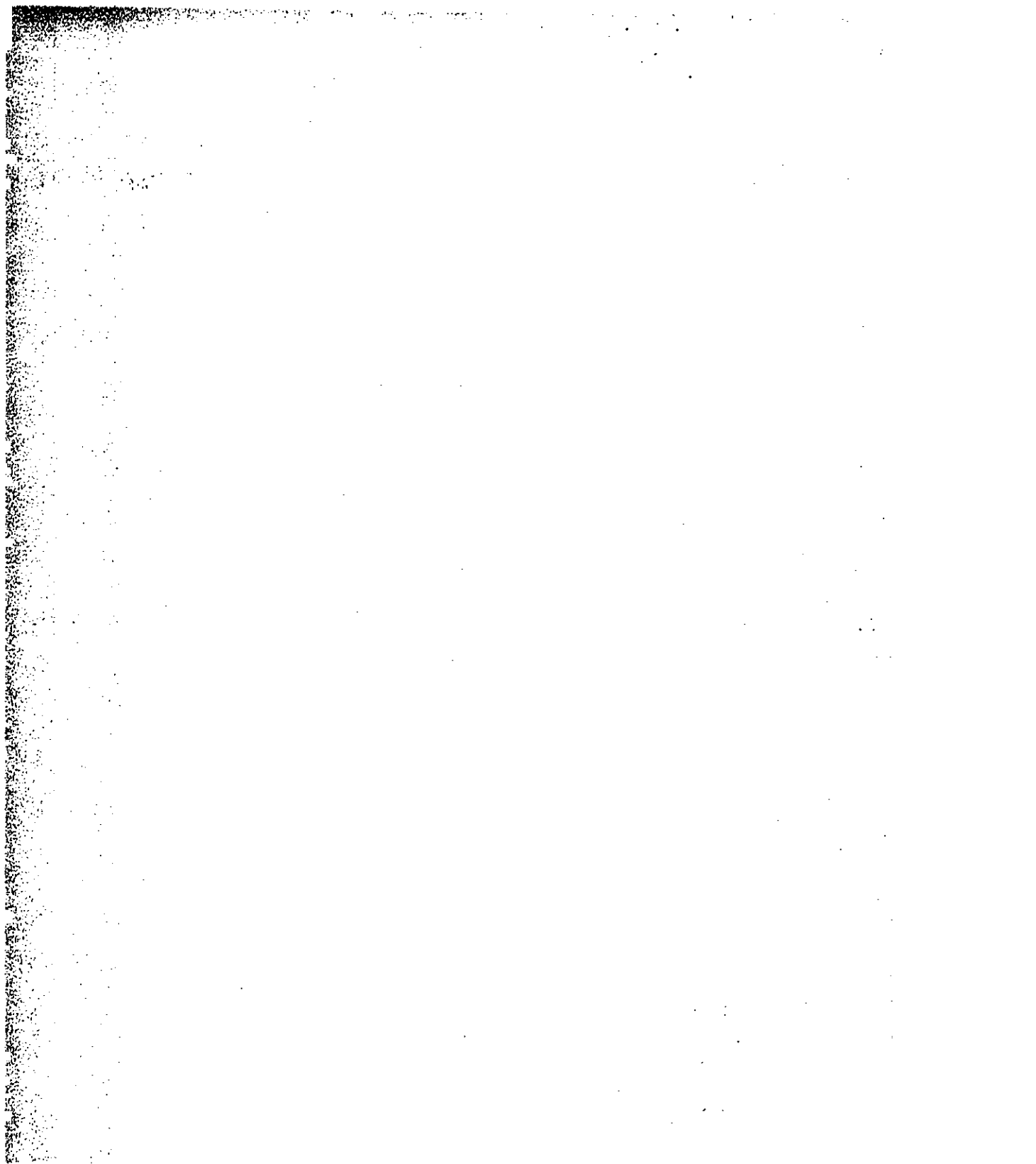
I, JOHN C. KIPPLEY, a notary public, do hereby certify that on this 19 day of JANUARY 19 99, personally appeared before me DEBRA ROESCH who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARMS INC that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires APRIL 27, 2005

John C. Kippley
Notary Public

(Notarial Seal)

SOS CRP 410 10/92



RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

98
ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
NO FILING FEE

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

FILE DATE 2/3/99
FILE NO. _____

RECEIVED RECEIVED

FEB 03 1999 2 5 1999

S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is DDT FARMS INC

The state of incorporation is SOUTH DAKOTA

2. The name of the registered agent in South Dakota and the registered office address is DEBRA ROESCH

12884 342 ND AVE ROSCOE SD Zip + 4 57471

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

5. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
<u>TRACY ROESCH</u>	<u>12884 342ND AVE</u>	<u>1000</u>	<u>COMMON</u>

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated JANUARY 19 19 99

By Debra Roesch
(Signature)

Its PRESIDENT
(Title)

STATE OF SOUTH DAKOTA
COUNTY OF BROWN ss

I, JOHN C. KIPPLEY, a notary public, do hereby certify that on this 19 day of JANUARY 19 99,

personally appeared before me DEBRA ROESCH, who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARMS INC that he/she signed the foregoing document

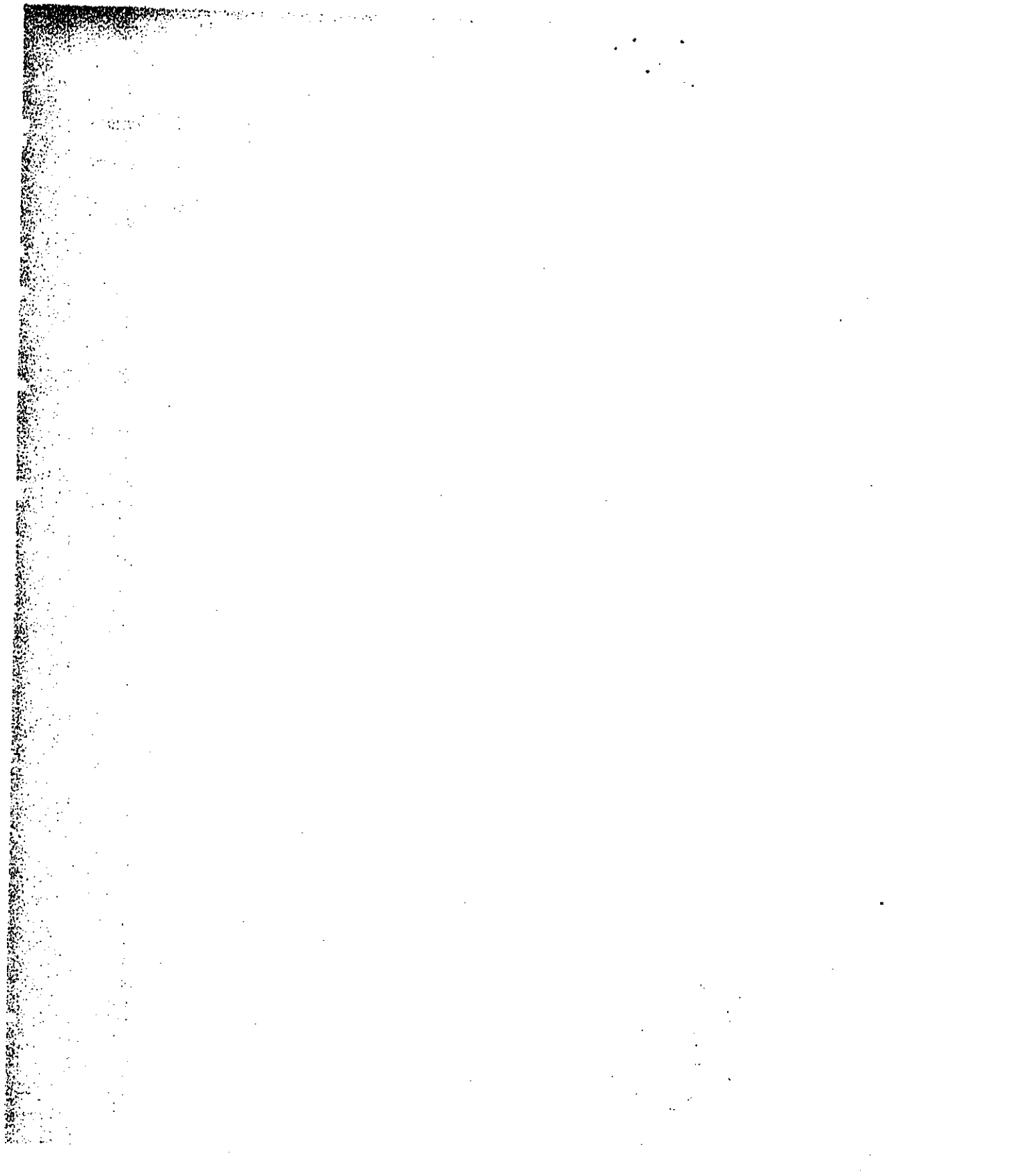
as officer of the corporation, and the statements thereon contained are true.

My Commission Expires APRIL 27, 2005

John C Kippley
Notary Public

(Notarial Seal)

SOS CRP 410 10/92



SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL AVE.
PIERRE, S.D. 57501
(605)773-4845
Fax (605)773-4550

94
ANNUAL REPORT
DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 2/3/99
RECEIPT NO. _____
RECEIVED
FEB 03 1999
RECEIVED
JAN 25 1999
S.D. SEC. OF STATE
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DF033457 9/94
DDT FARMS, INC.
SCHNEIDER, JULIUS
HCR 1 BOX 70
ROSCOE, SD 57471-9560

Telephone # _____
FAX # _____
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 FARMING

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
<u>JULIUS SCHNEIDER</u>	President	<u>HCR 1 BOX 70</u>	<u>ROSCOE</u>	<u>SD</u>	<u>57471-9560</u>
<u>DORTHY SCHNEIDER</u>	Vice President	<u>HCR 1 BOX 70</u>	<u>ROSCOE</u>	<u>SD</u>	<u>57471-9560</u>
<u>DORTHY SCHNEIDER</u>	Secretary	<u>HCR 1 BOX 70</u>	<u>ROSCOE</u>	<u>SD</u>	<u>57471-9560</u>
<u>DORTHY SCHNEIDER</u>	Treasurer	<u>HCR 1 BOX 70</u>	<u>ROSCOE</u>	<u>SD</u>	<u>57471-9560</u>

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
<u>25,000</u>	<u>Common</u>		<u>\$ 1.00</u>

5. NUMBER OF SHARES ACTUALLY ISSUED	CLASS	SERIES	PAR VALUE
<u>1,000</u>	<u>Common</u>		<u>\$ 1.00</u>

6. The amount of its stated capital is \$ \$ 1000.00 (Money received for issued shares)

The report must be signed by the chairman of the board of directors, its president, or any other officer in the presence of a notary public.

Dated JANUARY 19, 19 99

Julius Schneider
(Signature)
PRESIDENT
(Title)

STATE OF SOUTH DAKOTA
COUNTY OF BROWN

I, JOHN C. KIRKLEY, a notary public, do hereby certify that on this 19 day of JANUARY 19 99, personally appeared before me JULIUS SCHNEIDER who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARMS corporation, and the statements therein contained are true.

APRIL 27, 2005
My Commission Expires
(Notarial Seal)

John C. Kirkley
(Notary Public)

94

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
NO FILING FEE

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

FILE DATE _____
FILE NO. _____

RECEIVED RECEIVED
FEB 03 1999 JAN 25 1999
S.D. SEC. OF STATE S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is DDT FARMS INC

The state of incorporation is SOUTH DAKOTA

2. The name of the registered agent in South Dakota and the registered office address is _____

JULIUS SCHNEIDER HCR 1 BOX 70 ROSCOE SD Zip + 4 57471-9560

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

SW 1/4 30-124-70 BRYANT EDWARDS SD

5. List only the changes of the names or addresses of the officers and directors.

NAME REPLACED AS OFFICER OR DIRECTOR

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME ADDRESS NUMBER OF SHARES DEGREE OF KINDRED

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated JANUARY 19 19 99

By Julius Schneider
(Signature)

Its PRESIDENT
(Title)

STATE OF SOUTH DAKOTA
COUNTY OF BROWN ss

I, JOHN C. KIPPLEY, a notary public, do hereby certify that on this 19 day of JANUARY 1999, personally appeared before me JULIUS SCHNEIDER who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARMS INC that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires APRIL 27, 2005

John C. Kippley
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, SD 57501-5070
605-773-4845

STATEMENT OF CHANGE OF
REGISTERED OFFICE, OR REGISTERED AGENT, OR BOTH
FILING FEE: \$10

RECEIVED
FEB 03 1999
S.D. SEC. OF STATE

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits this statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

- The name of the corporation is DDT FARMS INC
- The previous street address, or a statement that there is no street address, of its registered office HCP 1 BOX 70 ROSCOE SD ZIP + 4 57471-9560
- The street address, or a statement that there is no street address, to which the registered office is to be changed is 12884 342ND AVE ROSCOE SD ZIP + 4 57471
- The name of its previous registered agent is JULIUS SCHNEIDER
- The name of its successor registered agent is * DEBRA ROESCH
* The Consent of Registered Agent below must be completed by the new agent.
- The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
- 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.

Date FEBRUARY 2 19 99

Debra Roesch
(Signature)
PRESIDENT
(Title)

STATE OF SOUTH DAKOTA ss
COUNTY OF BROWN

I, JOHN C. KIPPLEY, a notary public, do hereby certify that on this 2 day of FEBRUARY 19 99, personally appeared before me DEBRA ROESCH who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARM INC that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires APRIL 27, 2005

John C. Kippley
Notary Public

(Notarial Seal)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, DEBRA ROESCH, hereby give my consent to serve as the
(name of registered agent)
registered agent for DDT FARMS INC
(corporate name)

Dated FEBRUARY 2 19 99

Debra Roesch
(signature of registered agent)

10/09

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501
605-773-4845

314 Day of
Feb. 1999
Debra Roesch
Notary Public
OF STATE

APPLICATION FOR REINSTATEMENT

RECEIVED
JAN 25 1999
S.D. SEC. OF STATE
RECEIVED
FEB 03 1999
S.D. SEC. OF STATE

1. The name of the corporation is DDT FARMS, INC
2. The date of its administrative dissolution JUNE 1, 1995
3. State that the ground or grounds for dissolution either did not exist, or have been eliminated by filing all required reports and paying all fees and penalties
ALL REPORTS AND PAYING ALL FEES
4. The corporation's name satisfies the requirements of chapter 47-2.
5. Attached hereto is a certificate from the Department of Revenue reciting that any taxes owed by the corporation have been paid.

Application may be signed by the chairman of the board of directors, the president or any other officer

Dated JANUARY 19, 1999

Debra Roesch
PRESIDENT
(title)

Filing Fee Based on authorized capital stock 100

STATE OF SOUTH DAKOTA
COUNTY OF BROWN ss

I, JOHN C. KIPPLEY, a notary public, do hereby certify that on this 19 day of JANUARY, 1999, personally appeared before me DEBRA ROESCH who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARMS INC. that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true

My Commission Expires APRIL 27, 2005

John C. Kippley
Notary Public

(Notarial Seal)

Submit one original and one exact or conformed copy for filing with the certificate from the Department of Revenue and all delinquent annual reports, filing fees and penalties.



DEPARTMENT OF REVENUE
445 EAST CAPITOL AVENUE
PIERRE, SD 57501-3185
(605) 773-3311

**CORPORATION
REINSTATEMENT TAX
CERTIFICATION FORM**

RECEIVED

JAN 25 1999

S.D. SEC. OF STATE
RECEIVED

FEB 03 1999

S.D. SEC. OF STATE

DDT Farms, Inc.
HCR 1 Box 70
Roscoe, SD 57471
Federal Tax ID

DATE: January 13, 1999

As of the above date, the tax status of the above named corporation is as follows:

SALES TAX DIVISION

- owes no taxes
- unknown (no records could be found) *OB 1-13-99*
- owes the following: _____

SPECIAL TAXES DIVISION

- owes no taxes
- unknown (no records could be found) *cf 1-13-99*
- owes the following: _____

MOTOR VEHICLE DIVISION

- owes no taxes
- unknown (no records could be found) *1-14-99 MF/PPB*
- owes the following: _____ *1-14-99 MF-PPB*

South Dakota Department of Revenue

By: *[Signature]* *1-20-99*

This certification extends only to taxes administered and collected by the Department of Revenue. This is not to be construed as a waiver to collect taxes found to be due as a result of an audit, the correction of incorrect returns filed by the corporation, or the failure of the corporation to file required returns.

40101010

Receipt No: _____

76-128 4905292-0947
3/3/99

File Number: DF033457

REINSTATEMENT, ANNUAL REPORT AND STATE OF CHANGE

For

DDT FARMS, INC.

File at the request of:

KIPPLEY ACCOUNTING, INC.
213 5TH AVE NW
ABERDEEN SD 57401

STATE OF SOUTH DAKOTA

SS.

OFFICE OF THE SECRETARY OF STATE

Filed in the office of Secretary of State on

Date February 3, 1999

Joyce Hazeltine
Secretary of State

Fee Recieved \$90 RI, \$375 AR, \$10 SC

SOS CRP 491 10/93

130007*

95

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK

NO FILING FEE

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

FILE DATE _____
FILE NO. _____

RECEIVED
RECEIVED
FEB 03 1999
JAN 25 1999
S.D. SEC. OF STATE
S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is DDT FARMS INC

The state of incorporation is SOUTH DAKOTA

2. The name of the registered agent in South Dakota and the registered office address is DEBRA ROESCH
12884 342ND AVE ROSCOE SD Zip + 4 57471

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

5. List only the changes of the names or addresses of the officers and directors.			
NAME	REPLACED	AS OFFICER OR DIRECTOR	
<u>DEBRA ROESCH</u>	<u>JULIUS SCHNEIDER</u>	<u>OFFICER AND DIRECTOR</u>	

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders			
NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
<u>DEBRA ROESCH</u>	<u>12884 342ND AVE</u>	<u>1000</u>	<u>COMMON</u>

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated JANUARY 19 19 99

By Debra Roesch
(Signature)

Its PRESIDENT
(Title)

STATE OF SOUTH DAKOTA
COUNTY OF BROWN ss

I, JOHN C. KIPPLEY, a notary public, do hereby certify that on this 19 day of JANUARY 1999, personally appeared before me DEBRA ROESCH who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARMS INC that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires APRIL 27, 2005

John C. Kippley
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL AVE.
PIERRE, S.D. 57501
(605)773-4845
Fax (605)773-4550

97
ANNUAL REPORT
DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILE DATE 2/3/99
RECEIPT NO. _____
RECEIVED RECEIVED
FEB 03 1999 JAN 25 1999

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:

DP033457
DDT FARMS, INC.
SCHREIDER, JULIUS
HCR 1 BOX 70
ROSCOE, SD 57471-9560

9/97

Telephone # _____
FAX # _____
Federal Taxpayer II
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 _____

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
_____	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 JANUARY 19, 19 99

STATE OF SOUTH DAKOTA
COUNTY OF BROWN

I, JOHN C. KIPPLEY, a notary public, do hereby certify that on this 19 day of JANUARY, 19 99, personally appeared before me DEBRA ROESCH who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARMS INC, that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

APRIL 27, 2005
My Commission Expires

(Notarial Seal)

Debra Roesch
(Signature)
PRESIDENT
(Title)
John C. Rippley
(Notary Public)

dber.pdf

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

97
ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
NO FILING FEE

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

FILE DATE 2/3/99
FILE NO. _____
RECEIVED
RECEIVED
FEB 03 1999 2 5 1999
S.D. SEC. OF STATE S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is DDT FARMS INC

The state of incorporation is SOUTH DAKOTA

2. The name of the registered agent in South Dakota and the registered office address is DEBRA ROESCH
12884 342ND AVE ROSCOE SD Zip + 4 57471

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

5. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated JANUARY 19 19 99

By Debra Roesch
(Signature)
Its PRESIDENT
(Title)

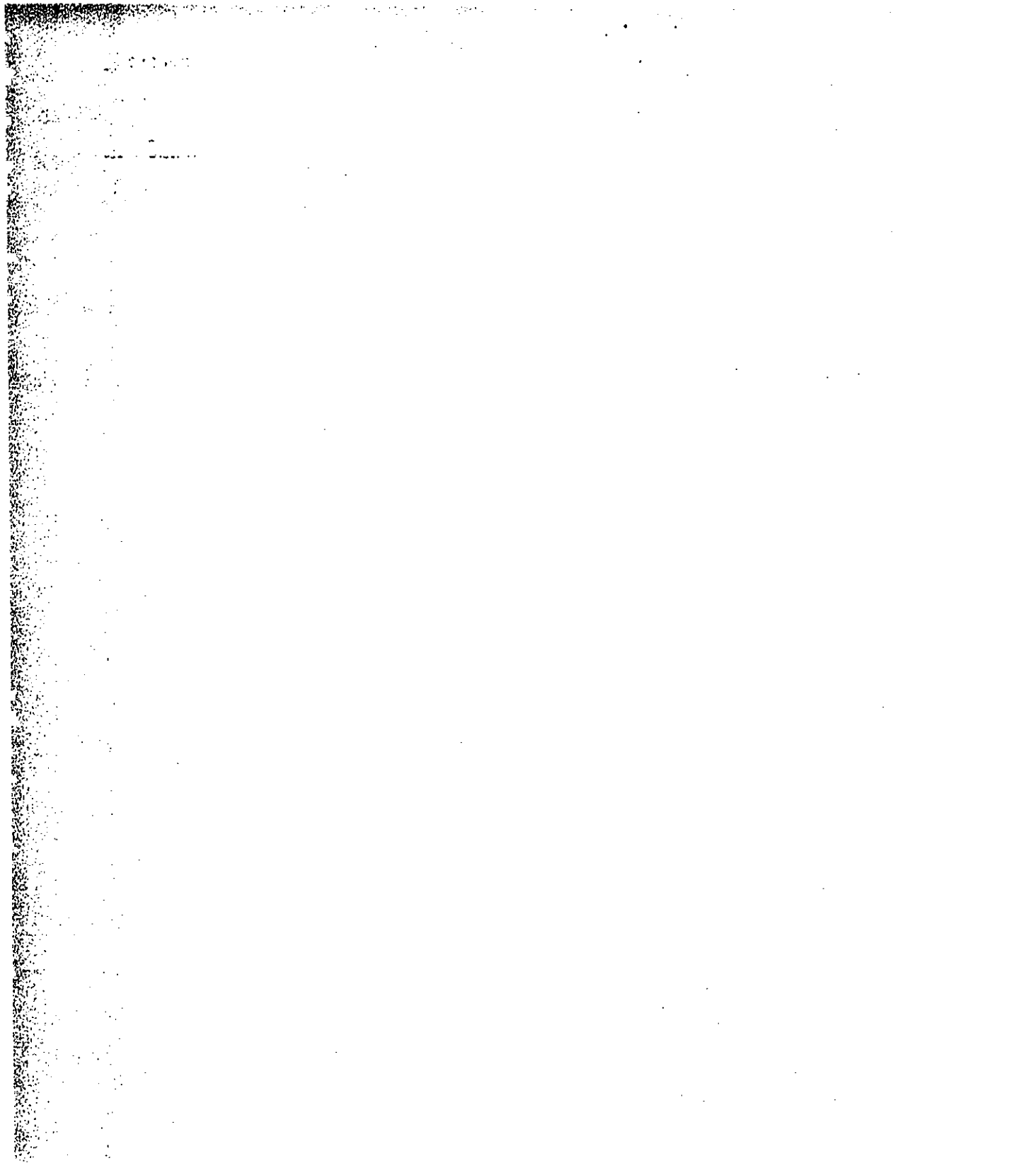
STATE OF SOUTH DAKOTA
COUNTY OF BROWN ss

I, JOHN C. KIPPLEY, a notary public, do hereby certify that on this 19 day of JANUARY 19 99, personally appeared before me DEBRA ROESCH who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARMS INC that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true
My Commission Expires APRIL 27, 2005

John C. Kippley
Notary Public

(Notarial Seal)

SOS CRP 410 10/92



11/10/99

1999

RETURN TO SECRETARY OF STATE 500 E. CAPITOL PIERRE, S.D. 57501-5077 605-773-4845 FAX (605) 773-4550

ANNUAL REPORT

DOMESTIC PLEASE TYPE OR USE BLACK INK

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

FILE DATE 9-10-99 RECEIPT NO. 826346

RECEIVED

SEP 10 1999

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DF-033457 SEP/98 DDT FARMS, INC. ROESCH, DEBRA 12884 342ND AVE ROSCOE, SD 57471-5202

Telephone # FAX # 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.

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:

Table with columns: NAME, OFFICE, STREET ADDRESS, CITY, STATE, ZIP+4. Rows for 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 SEPTEMBER 8 19 99

By Debra Roesch (Signature)

Its PRESIDENT (Title)

STATE OF SOUTH DAKOTA COUNTY OF BROWN ss

I, JOHN C. RIPPLEY, a notary public, do hereby certify that on this 8 day of SEPTEMBER 19 99, personally appeared before me DEBRA ROESCH who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARMS INC the corporation

named above, and signed the foregoing document as officer of the corporation, and the statements therein contained are true. My Commission Expires APRIL 27, 2005

Notary Public signature

(Notary Seal)

SOS CRP 6/98

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 _____ 19 _____

(Signature)

(Title)

STATE OF _____ ss
COUNTY OF _____

I, _____, a notary public, do hereby certify that on this _____ day
of _____ 19_____, personally appeared before me _____
who, being by me first duly sworn, declared that he/she is the _____ of _____
_____ that he/she signed the foregoing document as officer of
the corporation, and the statements therein contained are true.

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 _____ 19 _____

(signature)

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLOCK LETTERS

NO FILING FEE

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

FILE DATE _____
FILE NO. 820346

RECEIVED
SEP 10 1999
S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is DDT FARMS INC

The state of incorporation is SOUTH DAKOTA

2. The name of the registered agent in South Dakota and the registered office address is DEBRA ROESCH

12884 342ND AVE ROSCOF SD Zip + 4 57471-5202

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation

NONE

5. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

NONE

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is _____%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated SEPTEMBER 8 19 99

By Debra Roesch
(Signature)
Its president
(Title)

STATE OF SOUTH DAKOTA
COUNTY OF BROWN ss

I, JOHN C. KIPPLEY, a notary public, do hereby certify that on this 8 day of SEPTEMBER 1900, personally appeared before me DEBRA ROESCH, who, being by me first duly sworn, declared that he/she is the PRESIDENT of DDT FARMS INC that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires APRIL 27, 1999

John C. Kippley
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

2000

RETURN TO
SECRETARY OF STATE
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

ANNUAL REPORT 4.3367

DOMESTIC 9/14/00
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 9-1-00
RECEIPT NO. 906187

RECEIVED

AUG 25 '00

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DF-033457 Sep-99
DDT FARMS, INC.
ROESCH, DEBRA
12884 342ND AVE

ROSCOE SD 57471-5202

Telephone # (605) 287-4181
FAX # _____
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 _____

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 8/12/2000

By Debra Roesch
(Signature)

Its President
(Title)

STATE OF South Dakota ss
COUNTY OF EDMUNDS

On this the 22nd day of August, 2000, before me, Edward J Dasch
personally appeared Debra Roesch, known to me, or proved to me,
to be the Pres 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 _____

Edward J Dasch
Notary Public
EDMUNDS County Reg of Deeds
SOS CRP 11/99

(Notarial Seal)

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)

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK

NO FILING FEE

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

FILE DATE _____
FILE NO. _____

RECEIVED

AUG 23 '00

S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is DDT FARMS INC.

The state of incorporation is SCUTE DAKOTA

2. The name of the registered agent in South Dakota and the registered office address is Debra Roesch
12884 342nd Ave., Roscoe, SD. Zip +4 57471

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

5. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is _____%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated 8/23/00 By Debra Roesch

STATE OF South Dakota SS Its President
COUNTY OF Edmunds (True)

On this the 23rd day of August 2000 before me, Edward T Dosch
personally appeared Debra Roesch, known to me, or proved to me,

to be the Pres 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 _____

(Notarial Seal)

Edward T Dosch
Notary Public
Edmunds County Reg of Deeds

SOS CRP 410 10/92

2000

RETURN TO
SECRETARY OF STATE
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

ANNUAL REPORT
DOMESTIC 0908204.3366
9/14/00
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 9-1-00
RECEIPT NO. 906191
RECEIVED
AUG 23 '00
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DF-026671 Sep-99
MEDHAUG FARMS, INC.
MEDHAUG, JASON
44735 107TH ST

VEBLEN SD 57270-5447

Telephone # _____
FAX # _____
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 _____

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 August 17, 2000

By Jason Medhaug
(Signature)
Its Secretary/Treasurer
(Title)

STATE OF SOUTH DAKOTA ss
COUNTY OF MARSHALL

On this the 17th day of August, 2000, before me, Danny R. Smeins
personally appeared Jason Medhaug, known to me, or proved to me,
to be the Secretary/Treasurer 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 August 14, 2006

Danny R. Smeins
Notary Public

(Notarial Seal)

SOS CRP 11/99

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4846

**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)

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK

NO FILING FEE

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

FILE DATE _____
FILE NO. _____

RECEIVED

AUG 23 '00

S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is Medhaug Farms, Inc.
The state of incorporation is South Dakota

2. The name of the registered agent in South Dakota and the registered office address is Jason Medhaug,
44735 107th St., Veblen, SD Zip + 4 57270-5447

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is NA

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

West Half of Southeast Quarter (W $\frac{1}{2}$ SE $\frac{1}{4}$) and South Half of Southwest Quarter (S $\frac{1}{2}$ SW $\frac{1}{4}$) of Section Twenty-four (24), Township One Hundred Twenty-eight North (128N), Range Fifty-three (53), West of the 5th P.M., Marshall County, South Dakota leased from Jason R. Medhaug.

5. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
<u>none</u>		

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 400
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
<u>none</u>			

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is _____%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated August 17, 2000

By Jason Medhaug
(Signature)

STATE OF SOUTH DAKOTA ss
COUNTY OF MARSHALL

Its Sec. Tre.
(Title)

On this the 17th day of August, 2000, before me, Danny R. Smeins
personally appeared Jason Medhaug, known to me, or proved to me,
to be the Secretary/Treasurer 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 August 14, 2006

Danny R. Smeins
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

K 0000 2111 2222 2333

2001

RETURN TO
SECRETARY OF STATE
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 1-30-02
RECEIPT NO. 1065372
1065373
RECEIVED
JAN 30 '02

1. Corporate Name, Registered Agent and Registered Address:

DF-033457 SEP/2000
DDT FARMS, INC.
ROESCH, DEBRA
12884 342ND AVE

ROSCOE SD 57471-5202

Telephone # _____
FAX # _____
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.

S.D. SEC. OF STATE

***** 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 _____

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 8-21-01
By Debra Roesch
(Signature)
Its President
(Title)

STATE OF SOUTH DAKOTA ss
COUNTY OF Blount

On this the 21 day of Aug, 2001, before me, John C Kippel
personally appeared Debra Roesch, 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 Feb: 17, 2005
John C Kippel
Notary Public

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 _____

Dale M. Masch
(Signature)

President
(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)

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4550

0202212.3009
ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK

NO FILING FEE

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

FILE DATE _____
FILE NO. _____

RECEIVED

JAN 30 '02

S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report:

1. The name of the corporation is DDT FARMS INC
The state of incorporation is SOUTH DAKOTA

2. The name of the registered agent in South Dakota and the registered office address is Debra Russell
17994-342nd Ave RD 5000 SD Zip +4 5747-5202

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

5. List only the changes of the names or addresses of the officers and directors.
NAME REPLACED AS OFFICER OR DIRECTOR

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders
NAME ADDRESS NUMBER OF SHARES DEGREE OF KINDRED

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated Aug 21 2001

By Debra Russell
(Signature)
Its President
(Title)

STATE OF SOUTH DAKOTA
COUNTY OF BLAINE ss

I, John Kippel, a notary public, do hereby certify that on this 21 day of August 2001 personally appeared before me Debra Russell who, being by me first duly sworn, declared that he/she is the President of DDT Farms Inc that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.
My Commission Expires April 27, 2005

John Kippel
Notary Public

(Notarial Seal)

2002

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 9/4/02
RECEIPT NO. 113358
RECEIVED
SEP 11 2002

1. Corporate Name, Registered Agent and Registered Address:

Barcode: 01-033457-SEP/2001
DF-033457 SEP/2001
DDT FARMS, INC.
ROESCH, DEBRA
12884 342ND AVE
ROSCOE SD 57471-5202

Telephone #
FAX #
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.

S.D. SEC. OF STATE

***** 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.

[X] 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

Table with 7 columns: NAME, OFFICE, STREET ADDRESS, CITY, STATE, ZIP+4. Rows for 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.

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.

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 Aug 30, 2002 By Debra Rosch (Signature)

its President (Title)

STATE OF South Dakota ss COUNTY OF Edmund

On this the 30th day of Aug 2002, before me, Edward J. Stadel personally appeared Debra Rosch, 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 N/A Notary Public Edward J. Stadel

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4345

**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)

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SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL AVE.
PIERRE, S.D. 57501
(605)773-4845
Fax (605)773-4550

ANNUAL FARM REPORT
PLEASE TYPE OR USE BLOCK LETTERS
Filed pursuant to the provisions of SDCL 47-10-1
NO FILING FEE

FILE DATE _____

RECEIVED

1. Corporate name and address:


DF-033457 SEP/2001
DDT FARMS, INC.
ROESCH, DEBRA
12884 342ND AVE
ROSCOE SD 57471-5202

FILING DATE: Due during the SEP of the STATE domestic Certificate of Incorporation or the foreign Certificate of Authority was issued, and delinquent the last day of the following month.

2. The state of incorporation is South Dakota

3. The name of the registered agent in South Dakota and the registered office address is Debra Roesch;
12884 342nd Ave Roscoe, SD 57471

4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

6. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree.) #5 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0 %.
(Applies only to AUTHORIZED FARM CORPORATION)

Dated Aug 8, 2002

STATE OF South Dakota
COUNTY OF Edmunds

Debra Roesch
(Signature)
President
(Title)

On this the 8th day of August, 2002, before me, Edward J. Dasek
personally appeared Debra Roesch, 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.

4/8
My Commission Expires
(Notarial Seal)

Edward J. Dasek
(Notary Public) Edward J. Dasek
Edmunds County Register of Deeds farmrep.pdf

**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)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL AVE.
PIERRE, S.D. 57501
(605)773-4845
Fax (605)773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE _____

RECEIVED

AUG 29 '03

223 0294

1. Corporate name and address:



* D F - 0 3 3 4 5 7 *
DF-033457 SEP/2002
DDT FARMS, INC.
ROESCH, DEBRA
12884 342ND AVE
ROSCOE SD 57471-5202

FILING DATE: Due during SD SEC. OF STATE the
domestic Certificate of Incorporation or the
foreign Certificate of Authority was issued, and
delinquent the last day of the following month.

2. The state of incorporation is DDT Farms Inc SOUTH DAKOTA

3. The name of the registered agent in South Dakota and the registered office address is DEBRA ROESCH
12884-342ND AVE ROSCOE, SD 57471-5202

4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

6. List only the changes of the names or addresses of the officers and directors.

NAME

REPLACED

AS OFFICER OR DIRECTOR

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

NAME

ADDRESS

NUMBER OF SHARES

DEGREE OF KINDRED

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0 %.
(Applies only to AUTHORIZED FARM CORPORATION)

Dated Aug 28, 2003

Debra Roesch
(Signature)

STATE OF SOUTH DAKOTA

President
(Title)

COUNTY OF BROWN

On this the 28 day of AUGUST, 2003, before me, JOHN C KIRBY

personally appeared DEBRA ROESCH, known to me, or proved to me,

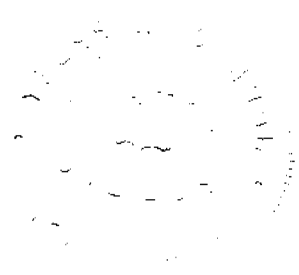
to be the President of the corporation that is described in and that executed the within

instrument and acknowledged to me that such corporation executed the same.

April 27, 2005
My Commission Expires

John C Kirby
(Notary Public)

(Notarial Seal)



SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL AVE.
PIERRE, S.D. 57501
(605)773-4845
Fax (605)773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 09/22/04
RECEIVED
SEP 22 '04
S.D. SEC. OF STATE

230 4713

1. Corporate name and address:



* D F 0 3 3 4 5 7 *
DF033457 SEP/2003
DDT FARMS, INC.
ROESCH, DEBRA
12884 342ND AVE
ROSCOE SD 57471-5202

FILING DATE: Due during the month the domestic Certificate of Incorporation or the foreign Certificate of Authority was issued, and delinquent the last day of the following month.

2. The state of incorporation is DDT Farms Inc; South Dakota

3. The name of the registered agent in South Dakota and the registered office address is Debra Roesch
12884 342nd Ave Roscoe, SD 57471-5202

4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

6. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 25090. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

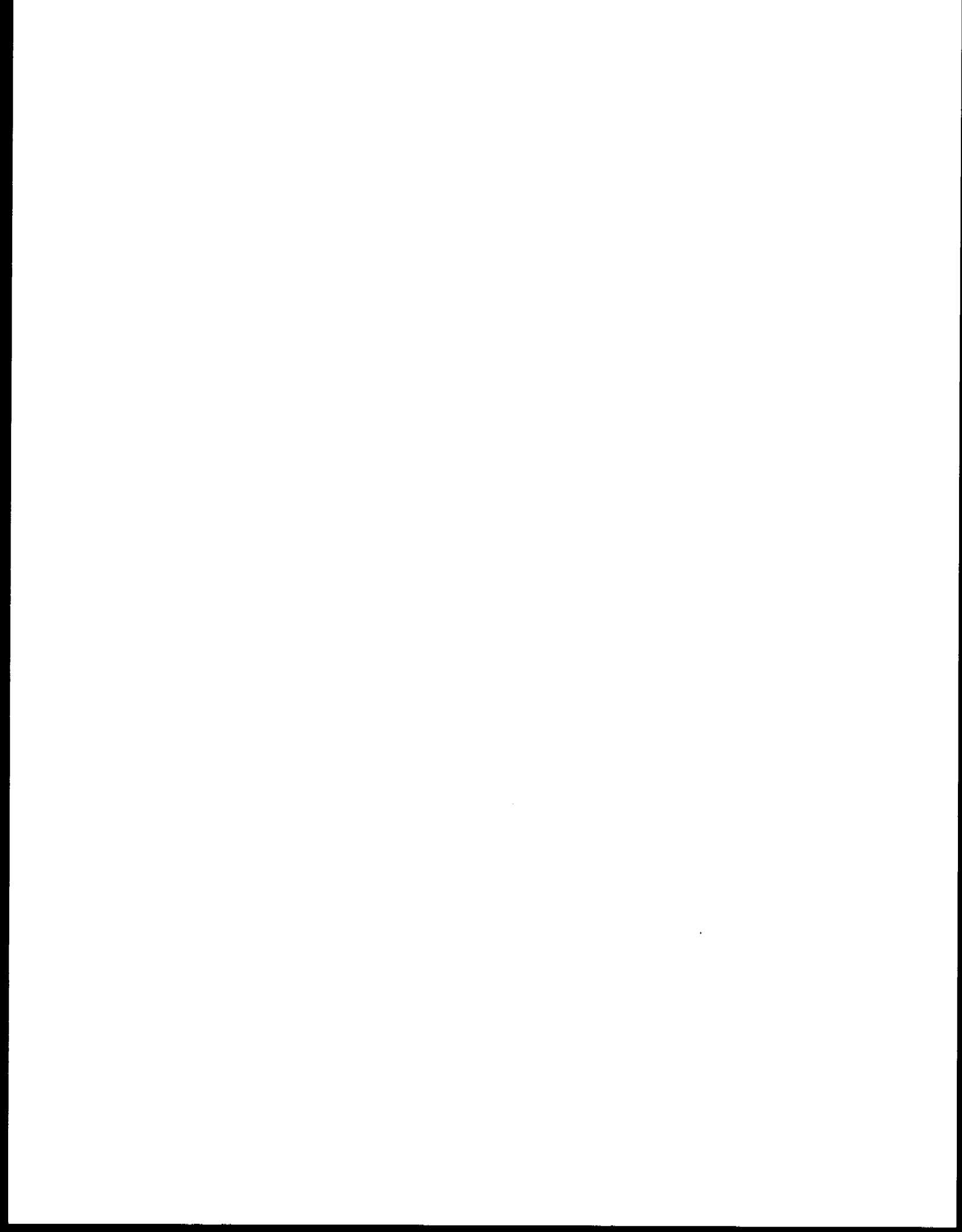
NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0 %.
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 092004

Debra Roesch
(Signature)

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 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 any other officer.

Dated _____

(Signature)

(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)

**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 any other officer.

Dated _____

(Signature)

(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)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL AVE.
PIERRE, S.D. 57501
(605)773-4845
Fax (605)773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 10/13/05
RECEIVED
OCT 13 '05
S.D. SEC. OF STATE

1. Corporate name and address:



* D F O 3 3 4 5 7 *
DF033457 SEP/2004
DDT FARMS, INC.
ROESCH, DEBRA
12884 342ND AVE
ROSCOE SD 57471-5202

FILING DATE: Due during the month the domestic Certificate of Incorporation or the foreign Certificate of Authority was issued, and delinquent the last day of the following month.

2. The state of incorporation is DDT Farms Inc.

3. The name of the registered agent in South Dakota and the registered office address is Debra Roesch
PO Box 546 Aberdeen SD 57402

4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

6. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0 %.
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 10-12-05

Debra Roesch
(Signature)

President
(Title)

242 0610



**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 DDT Farms Inc
2. The street address, or a statement that there is no street address, of its current registered office _____
12884 342nd Ave Roscoe SD ZIP + 4 57471
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. _____
PO Box 546 Aberdeen SD ZIP + 4 57402
4. The name of its current registered agent is Debra Roesch
5. The name of its new registered agent is * Debra Roesch

***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 10-12-05

Debra Roesch
Signature

Debra Roesch
Printed Name

President
Title

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, Debra Roesch, hereby give my consent to serve as the
(name of registered agent)

registered agent for DDT Farms Inc
(corporate name)

Dated 10-12-05

Debra Roesch
(signature)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL AVE.
PIERRE, S.D. 57501
(605)773-4845
Fax (605)773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 09/01/06

RECEIVED

SEP 1 '06

S.D. SEC. OF STATE

253 0596

1. Corporate name and address:



* D F 0 3 3 4 5 7 *
DF033457 SEP/2005
DDT FARMS, INC.
ROESCH, DEBRA
12884 342ND AVE
ROSCOE SD 57471-5202

FILING DATE: Due during the month the domestic Certificate of Incorporation or the foreign Certificate of Authority was issued, and delinquent the last day of the following month.

2. The state of incorporation is South Dakota DDT Farms Inc
3. The name of the registered agent in South Dakota and the registered office address is Debra Roesch
P.O. Box 546 Aberdeen, SD. 57402
4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

6. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1,000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

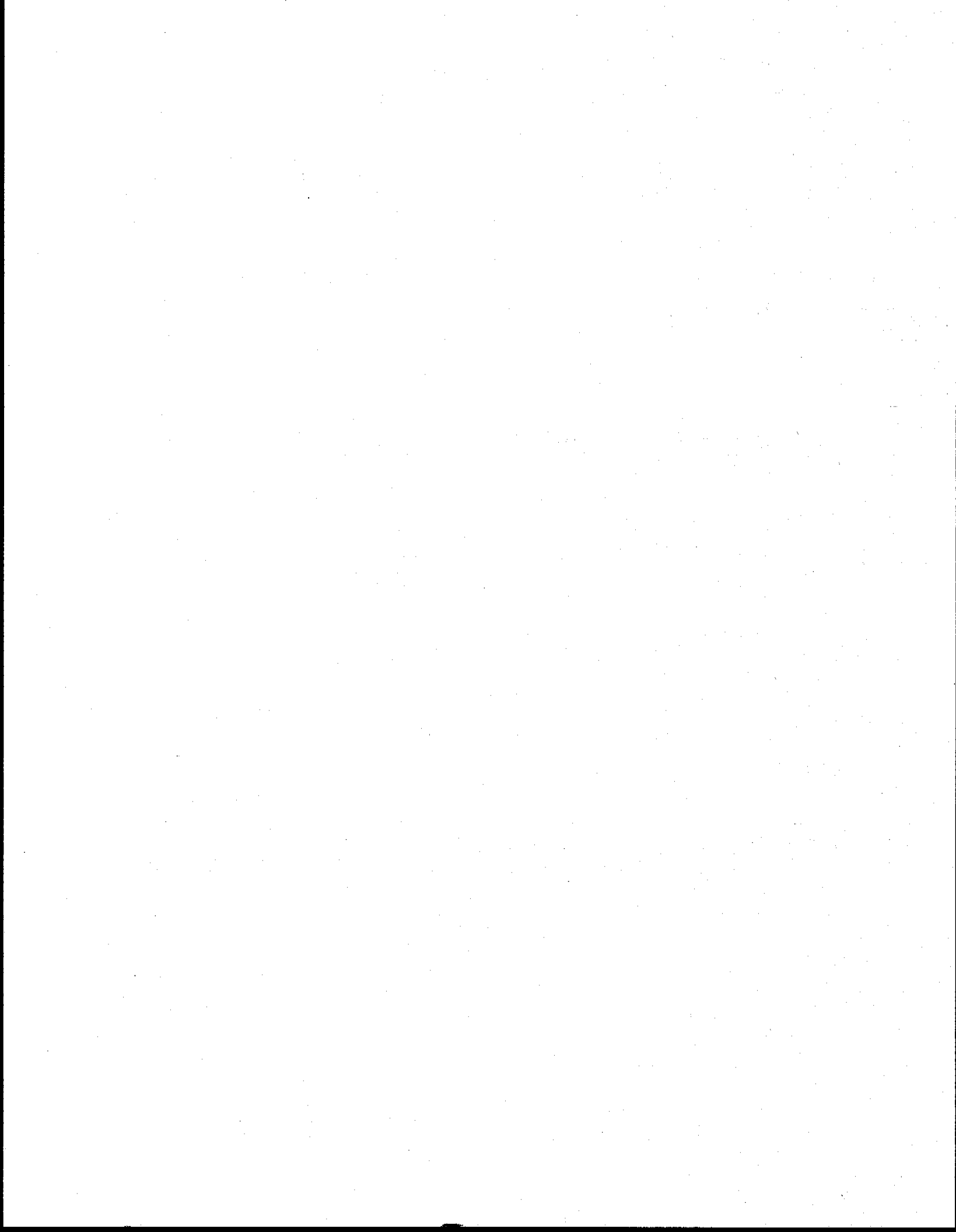
NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is _____ %.
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 082906

Debra Roesch
(Signature)

President
(Title)



2006

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 09/01/06
RECEIPT NO. 1590956

RECEIVED
SEP 1 '06

S.D. SEC. OF STATE

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



DF033457 SEP/2005
DDT FARMS, INC.
ROESCH, DEBRA
12884 342ND AVE
ROSCOE SD 57471-5202

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

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

Table with columns: NAME, OFFICE, STREET ADDRESS, CITY, STATE, ZIP+4. Rows for 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. Provide a brief description of the nature of the business

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 SHARES CLASS SERIES

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

Dated 082906

Debra Roesch
Signature

Debra Roesch
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)

**STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH**

File Date 9-18-2007
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 DOT FARMS INC
2. The street address, or a statement that there is no street address, of its current registered office _____
12884 342nd Ave Roscoe SD ZIP + 4 57471
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. 1227 N Lloyd St Do Box 546
Aberdeen SD ZIP + 4 57402
4. The name of its current registered agent is Debra Roesch
5. The name of its new registered agent is * Debra Roesch

***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 9-17-07

Debra Roesch
Signature

Debra Roesch
Printed Name

President
Title

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, Debra Roesch, hereby give my consent to serve as the
(name of registered agent)

registered agent for DOT FARMS INC
(corporate name)

Dated 9-17-07

Debra Roesch
(signature)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL AVE.
PIERRE, S.D. 57501
(605)773-4845
Fax (605)773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 9-18-2007

RECEIVED

SEP 18 2007

S.D. SEC. OF STATE

267 1664

1. Corporate name and address:



DF033457 SEP/2006
DDT FARMS, INC.
ROESCH, DEBRA
12884 342ND AVE
ROSCOE SD 57471-5202

FILING DATE: Due during the month the domestic Certificate of Incorporation or the foreign Certificate of Authority was issued, and delinquent the last day of the following month.

2. The state of incorporation is DDT Farms Inc

3. The name of the registered agent in South Dakota and the registered office address is Debra Roesch
1227 N Lloyd St PO Box 546 Aberdeen SD 57402

4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

5. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

6. List only the changes of the names or addresses of the officers and directors.

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

7. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 1000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

8. List changes only of names, address and number of shares owned by shareholders

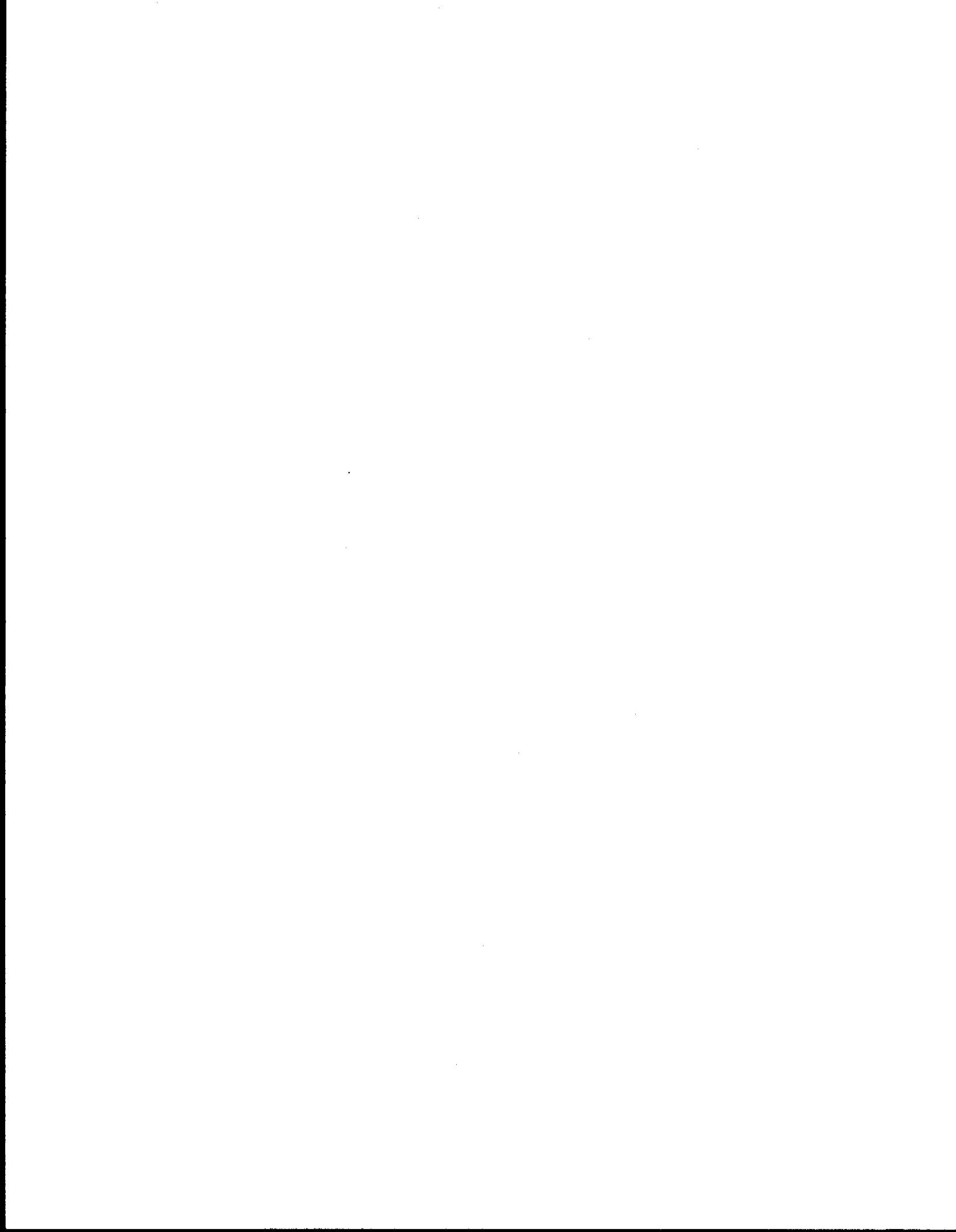
NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0%.
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 9-17-07

Debra Roesch
(Signature)

President
(Title)



281 0173 10/01/2008

2008

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	9-24-08
RECEIPT NO	183527
RECEIVED	
SEP 24 2008	
S.D. SEC. OF STATE	

1. Corporate Name, Registered Agent Name and Address:



* D F 0 3 3 4 5 7 *
DF033457 SEP/2007
DDT FARMS, INC.
ROESCH, DEBRA
1227 N LLOYD ST
PO BOX 546
ABERDEEN SD 57402-0546

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.

1227 N Lloyd St	Aberdeen	SD	57401
Street Address	City	State	ZIP+4
PO Box 546	Aberdeen	SD	57402-0546
Mailing Address (Optional)	City	State	ZIP+4

3. The name of the South Dakota Registered Agent Debra Roesch

1227 N Lloyd St	Aberdeen	SD	57401
Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
PO Box 546	Aberdeen	SD	57401
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"/>	Debra Roesch	1227 N Lloyd St	Aberdeen	SD	57401
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	Debra Roesch	1227 N Lloyd St	Aberdeen	SD	57401
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	Debra Roesch	1227 N Lloyd St	Aberdeen	SD	57401
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	Debra Roesch	1227 N Lloyd St	Aberdeen	SD	57401
	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 9-23-08

Debra Roesch
(Signature of an authorized officer)

Debra Roesch
(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)

281 0174 10/01/2008

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

ANNUAL FARM REPORT Corporation

Please Type or Print Clearly in Ink
No Filing Fee

FILE DATE 9-24-08
RECEIPT NO 183527
RECEIVED
SEP 24 2008
S.D. SEC. OF STATE

1. Corporate ID, Name and Address:



* D F 0 3 3 4 5 7 *
DF033457 SEP/2007
DDT FARMS, INC.
ROESCH, DEBRA
1227 N LLOYD ST
PO BOX 546
ABERDEEN SD 57402-0546

Telephone # _____
FAX # _____
FILING DATE: To be filed with the Annual Report.

2. The name of the South Dakota Registered Agent Debra Roesch
1227 N Lloyd St Aberdeen SD 57401
Street Address (Required to be a South Dakota Address) City State ZIP+4
PO Box 546 Aberdeen SD 57401
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

3. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

County	Section	Township	Acres

4. Please complete the appropriate section:

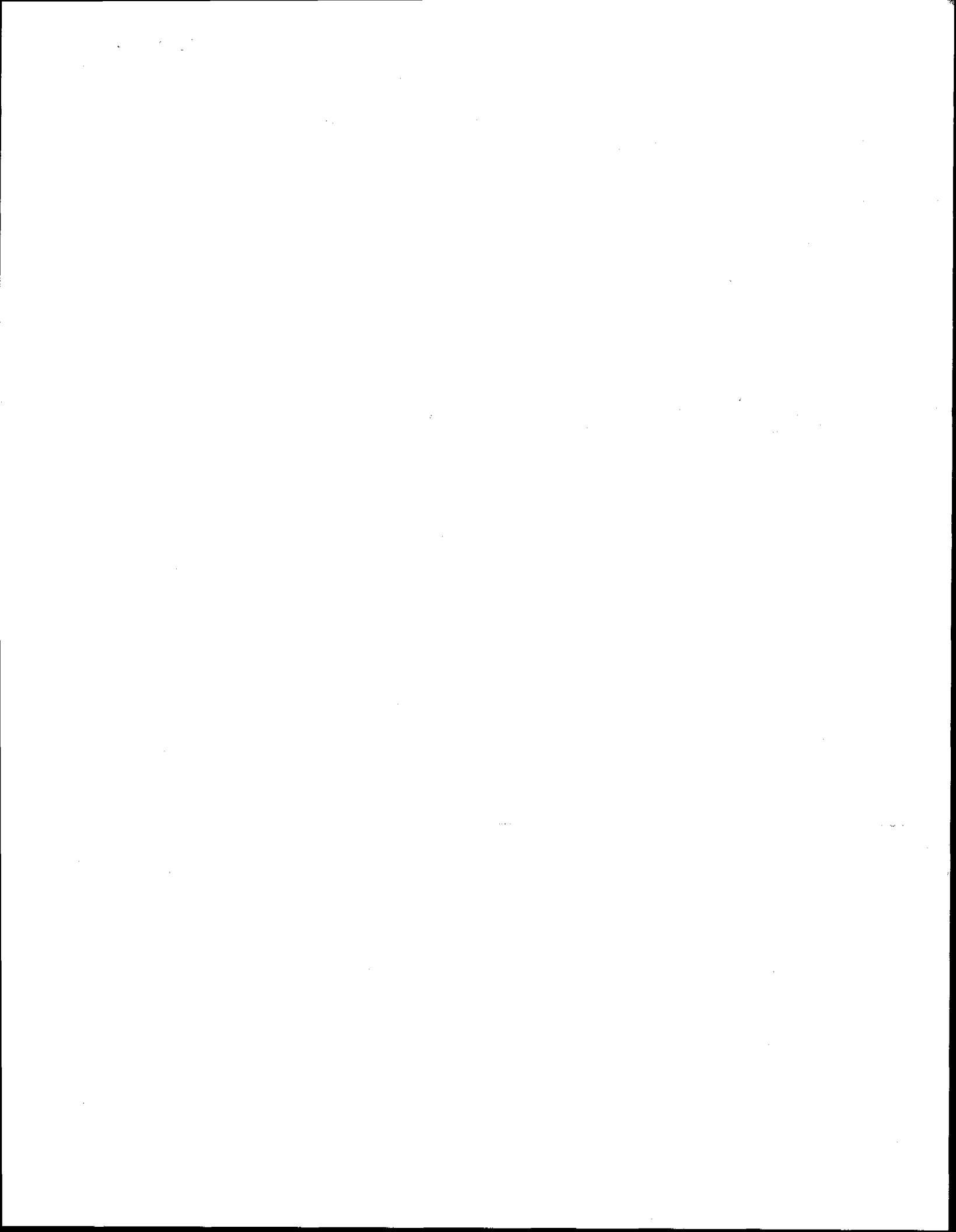
Family Farm Corporation	The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity.	<u>1000</u>
Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	<u>0</u> %

5. List any changes to shareholder name, address, number of shares owned, and degree of kindred.

Name	Address	City	State	Zip	Shares	Kindred

Dated 9-23-08

Debra Roesch
(Signature of an authorized officer)
Debra Roesch
(Printed Name)
President
(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 09/01/09
RECEIPT NO 1945680
RECEIVED RECEIVED
AUG 31 2009 AUG 18 2009
S.D. SEC. OF STATE S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DF033457 SEP/2008
DDT FARMS, INC.
ROESCH, DEBRA
PO BOX 546
ABERDEEN SD 57402-0546

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.

PO Box 546 Aberdeen SD 57401
Street Address City State ZIP+4

1227 N. Wloyd Street Aberdeen SD 57401
Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent Debra Roesch

PO Box 546 Aberdeen SD 57401
Street Address (Required to be a South Dakota Address) City State ZIP+4

1227 N. Wloyd St. Aberdeen SD 57401
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.

- Debra Roesch PO Box 546 Aberdeen SD 57401 President
Debra Roesch PO Box 546 Aberdeen SD 57401 Vice President
Debra Roesch P.O. Box 546 Aberdeen SD 57401 Secretary
Debra Roesch PO Box 546 Aberdeen SD 57401 Treasurer
Director
Director

Dated August 17th, 2009

Debra Roesch (Signature of an authorized officer)
Debra Roesch (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)

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

ANNUAL FARM REPORT

Corporation

Please Type or Print Clearly in Ink

No Filing Fee

FILE DATE 09/01/09
RECEIPT NO 1945680
RECEIVED RECEIVED
AUG 31 2009 AUG 18 2009
S.D. SEC. OF STATE S.D. SEC. OF STATE

1. Corporate ID, Name and Address:



* D F 0 3 3 4 5 7 *
DF033457 SEP/2008
DDT FARMS, INC.
ROESCH, DEBRA
PO BOX 546
ABERDEEN SD 57402-0546

Telephone # _____
FAX # _____
FILING DATE: To be filed with the Annual Report.

2. The name of the South Dakota Registered Agent Debra Roesch

1227 N. Lloyd Street PO Box 546 Aberdeen SD 57401
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

3. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

County	Section	Township	Acres
County	Section	Township	Acres
County	Section	Township	Acres

4. Please complete the appropriate section:

Family Farm Corporation	The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity.	<u>1000</u>
Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	_____%

5. List any changes to shareholder name, address, number of shares owned, and degree of kindred.

Name	Address	City	State	Zip	Shares	Kindred
Name	Address	City	State	Zip	Shares	Kindred
Name	Address	City	State	Zip	Shares	Kindred

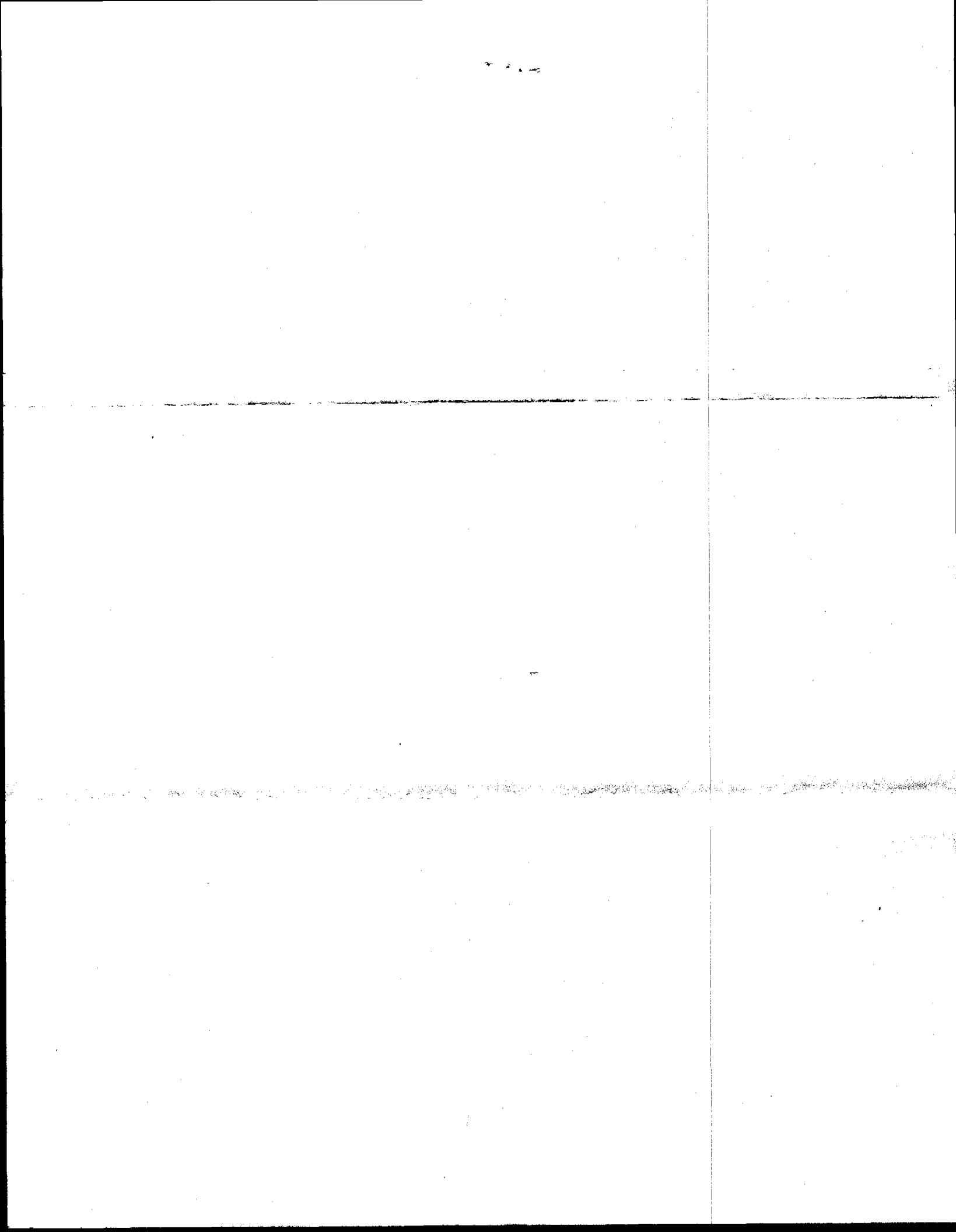
Dated August 17, 2009

Debra Roesch
(Signature of an authorized officer)

Debra Roesch
(Printed Name)

President
(Title)

295 2202



311 3409 10/20/2010

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

ANNUAL FARM REPORT Corporation

Please Type or Print Clearly in Ink
No Filing Fee

FILE DATE 10/18/10
 RECEIPT NO _____
RECEIVED
OCT 07 2010
S.D. SEC. OF STATE
RECEIVED
SEP 28 2010
S.D. SEC. OF STATE
RECEIVED
OCT 18 2010
S.D. SEC. OF STATE

Telephone # _____
 FAX # _____
 FILING DATE: To be filed with the Annual Report.

1. Corporate ID, Name and Address:



* D F 0 3 3 4 5 7 *
DF033457 SEP/2009
DDT FARMS, INC.
ROESCH, DEBRA
PO BOX 546
ABERDEEN SD 57402-0546

2. The name of the South Dakota Registered Agent Debra Roesch

57401

1227 N. Woyd Street Aberdeen Aberdeen SD 57401
Street Address (Required to be a South Dakota Address) City State ZIP+4

* P.O. Box 546 Aberdeen SD 57401
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

3. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

County	Section	Township	Acres

4. Please complete the appropriate section:

Family Farm Corporation	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	<u>1000</u>
Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	<u>100</u> %

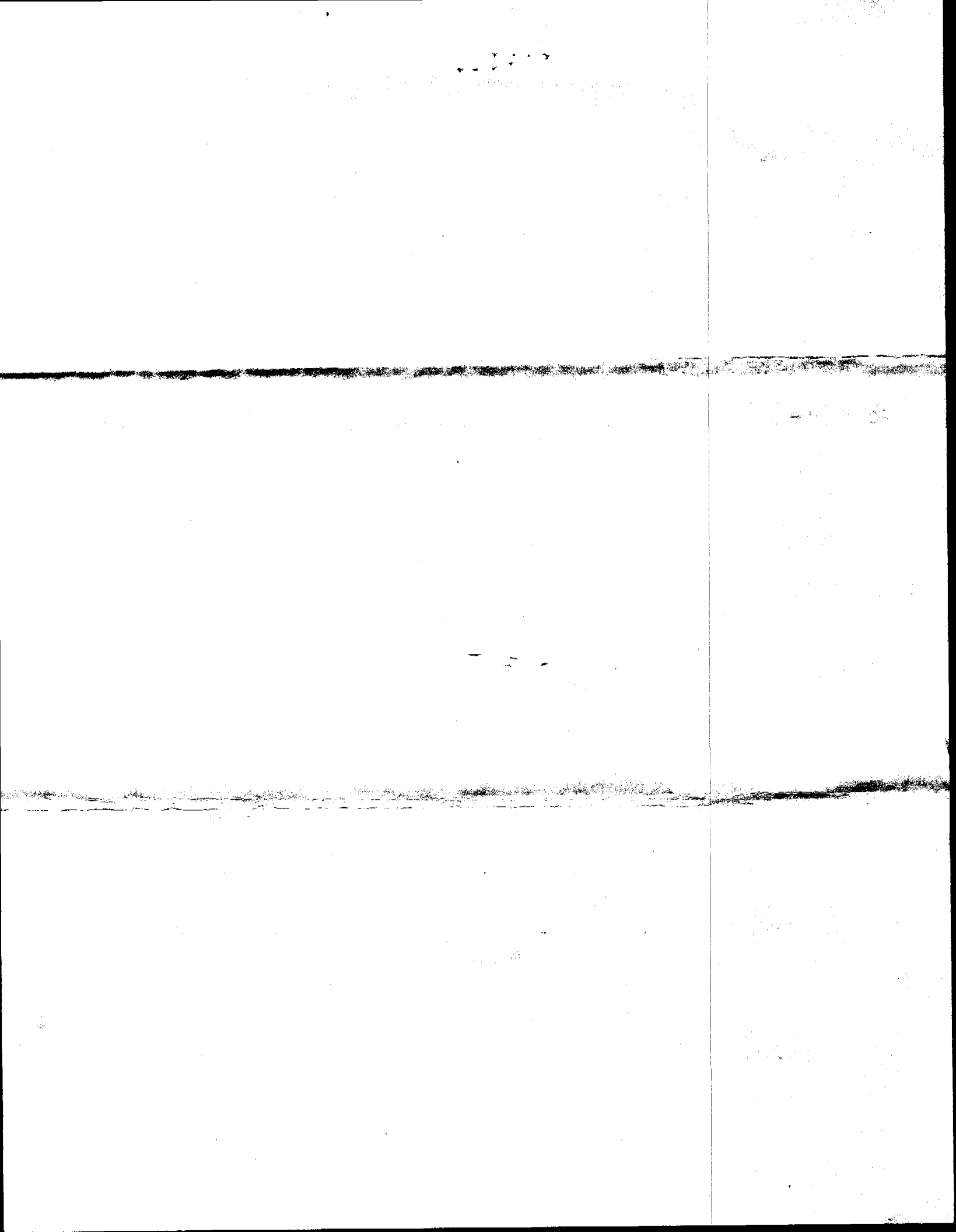
5. List any changes to shareholder name, address, number of shares owned, and degree of kindred.

Name	Address	City	State	Zip	Shares

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

Dated 9-22-10

Debra Roesch
(Signature of an Authorized Person)
Debra Roesch
(Printed Name)



311 3408 10/20/2010

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

RECEIVED RECEIVED RECEIVED
OCT 07 2010 SEP 28 2010 OCT 18 2010
S.D. SEC. OF STATE S.D. SEC. OF STATE S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DF033457 SEP/2009
DDT FARMS, INC.
ROESCH, DEBRA
PO BOX 546
ABERDEEN SD 57402-0546

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.

1227 N. Lloyd Street Aberdeen SD 57401
P.O. Box 546 Aberdeen SD 57401

4. The name of the South Dakota Registered Agent Debra Roesch

1227 - N. Lloyd Street Aberdeen SD 57401
P.O. Box 546 Aberdeen SD 57401

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.

Table with columns: Officer Name, Title, Street Address, City, State, ZIP+4. Includes entries for Debra Roesch as President, Vice President, Secretary, 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 9-22-10

Debra Roesch (Signature)
Debra Roesch (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 (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)

325 2389 10/31/2011

Enter Filing Year

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 10/28/11
RECEIPT NO 2194819
RECEIVED
OCT 28 2011
S.D. SEC. OF STATE

Telephone # _____

1. Corporate ID and Name:

DF033457
DDT Farms, Inc.
PO Box 546
Aberdeen, SD 57402-0546

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

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

1227 N Lloyd St	Aberdeen	SD	57401
Street Address	City	State	ZIP+4
PO Box 546	Aberdeen	SD	57402-0546
Mailing Address	City	State	ZIP+4

Email Address _____

4. The name of the South Dakota Registered Agent Debra Roesch

1227 N Lloyd St	Aberdeen	SD	57401
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO Box 546	Aberdeen	SD	57402-0546
Mailing Address in This State, if Different from Street Address	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.

<input checked="" type="checkbox"/>	Debra Roesch	PO Box 546	Aberdeen	SD	57402
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	Debra Roesch	PO Box 546	Aberdeen	SD	57402
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	Debra Roesch	PO Box 546	Aberdeen	SD	57402
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	Debra Roesch	PO Box 546	Aberdeen	SD	57402
	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 respect. Any violation is subject to a civil penalty.

Dated October 19, 2011

Debra Roesch
(Signature of an Authorized Person)

Email _____

Debra Roesch Debra Roesch
(Printed Name)

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



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

ANNUAL FARM REPORT

Corporation

Please Type or Print Clearly in Ink
 No Filing Fee

FILE DATE <u>10/28/11</u>
RECEIPT NO <u>2194819</u>
RECEIVED OCT 28 2011 S.D. SEC. OF STATE
Telephone # _____

1. Corporate ID, Name and Address:

DF033457
 DDT Farms, Inc.
 PO Box 546
 Aberdeen, SD 57402-0546

2. The name of the South Dakota Registered Agent Debra Roesch

1227 N Lloyd St	Aberdeen	SD	57401
Street Address or Rural Route Box Number in This State and PO Box 546	City	State	ZIP+4
Aberdeen	SD		57402-0546
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

Email Address _____

3. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

County	Section	Township	Acres

4. Please complete the appropriate section:


Family Farm Corporation	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	<u>1,000</u>
Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	<u>100</u> %

5. List any changes to shareholder name, address, number of shares owned, and degree of kindred (DOK).

Name	Address	City	State	Zip+4	Shares	DOK

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

Dated Oct 19, 2011



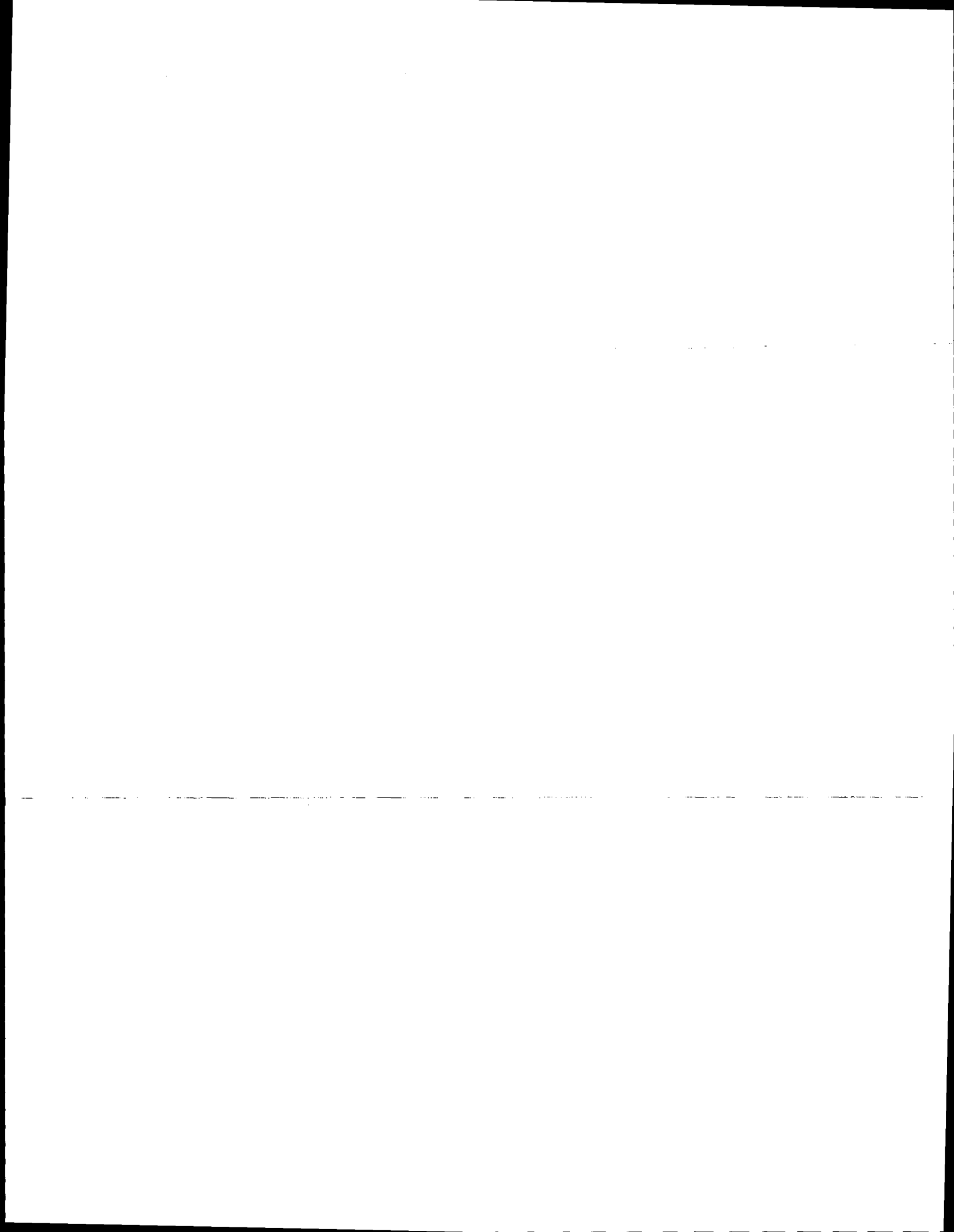
 (Signature of an Authorized Person)

Email _____

Debra Roesch Debra Roesch

 (Printed Name)

325 2390 10/31/2011



2012

Enter Filing Year

ANNUAL FARM REPORT

FILE 9/24/2012

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

Corporation

Please Type or Print Clearly In Ink

RECEIPT NO 65033

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

1. Corporate Name and Address:

DF033457
DDT FARMS, INC.
1227 N LLOYD ST
ABERDEEN, SD 57401-2152

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

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

1227 N LLOYD ST	ABERDEEN	SD	57401-2152
Street Address	City	State	ZIP+4
PO BOX 546	ABERDEEN	SD	57402-0546
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: DEBRA ROESCH

1227 N LLOYD ST	ABERDEEN	SD	57401-2152
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 546	ABERDEEN	SD	57402-0546
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. 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"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	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

6. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

7. Please complete the appropriate section:

Family Farm Corporation	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	1000
Authorized Farm	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Street Address	City	State	ZIP+4	Shares
------	----------------	------	-------	-------	--------

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

Signature Accepted Electronically

(Signature of an Authorized Person)

DEBRA ROESCH

(Printed Name)

2013

Enter Filing Year

ANNUAL FARM REPORT

FILE 9/27/2013

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

Corporation

Please Type or Print Clearly In Ink

RECEIPT NO 142390

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

1. Corporate Name and Address:

DF033457
DDT FARMS, INC.
1227 N LLOYD ST
ABERDEEN, SD 57401

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

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

1227 N LLOYD ST	ABERDEEN	SD	57401
Street Address	City	State	ZIP+4
PO BOX 546	ABERDEEN	SD	57402-0546
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: DEBRA ROESCH

1227 N LLOYD ST	ABERDEEN	SD	57401-2152
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 546	ABERDEEN	SD	57402-0546
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. 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"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	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

6. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

7. Please complete the appropriate section:

Family Farm Corporation	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	1000
Authorized Farm	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Street Address	City	State	ZIP+4	Shares
------	----------------	------	-------	-------	--------

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

Signature Accepted Electronically

(Signature of an Authorized Person)

DEBRA ROESCH

(Printed Name)

2014

Enter Filing Year

ANNUAL FARM REPORT

FILE DATE 10/15/2014

RECEIPT NO 239057

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

Corporation

Please Type or Print Clearly In Ink

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

1. Corporate Name and Address:

DF033457
DDT FARMS, INC.
1227 N LLOYD ST
ABERDEEN, SD 57401

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

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

1227 N LLOYD ST	ABERDEEN	SD	57401
Street Address	City	State	ZIP+4
PO BOX 546	ABERDEEN	SD	57402-0546
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: DEBRA ROESCH

1227 N LLOYD ST	ABERDEEN	SD	57401-2152
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 546	ABERDEEN	SD	57402-0546
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. 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"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	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

6. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

7. Please complete the appropriate section:

Family Farm Corporation	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	1000
Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Street Address	City	State	ZIP+4	Shares
------	----------------	------	-------	-------	--------

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 10/15/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

DEBRA ROESCH

(Printed Name)

2015

ANNUAL FARM REPORT

FILE DATE 9/16/2015

Enter Filing Year

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

Corporation
SDCL 47-27-18, 59-11-24

RECEIPT NO 335918

Please Type or Print Clearly In Ink

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

Telephone #

1. Corporate Name and Address:

DF033457

DDT FARMS, INC.

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

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

1227 N LLOYD ST ABERDEEN SD 57401
Actual Street Address or Rural Route Box Number City State ZIP+4
PO BOX 546 ABERDEEN SD 57402-0546
Mailing Address, if Different from Street Address City State ZIP+4
Email Address (Optional)

4. The name of the South Dakota Registered Agent

Agent Name: DEBRA ROESCH

1227 N LLOYD ST ABERDEEN SD 57401-2152
Actual Street Address or Rural Route Box Number in This State City State ZIP+4
PO BOX 546 ABERDEEN SD 57402-0546
Mailing Address in This State, if Different from Street Address City State ZIP+4
Email Address (Optional)

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 servers as a director. South Dakota Law requires at least one director.

[X] DEBRA ROESCH PO BOX 546 ABERDEEN SD 57402
President Actual Street Address City State ZIP+4
[] DEBRA ROESCH PO BOX 546 ABERDEEN SD 57402
Vice President Actual Street Address City State ZIP+4
[] DEBRA ROESCH PO BOX 546 ABERDEEN SD 57402
Secretary Actual Street Address City State ZIP+4
[] DEBRA ROESCH PO BOX 546 ABERDEEN SD 57402
Treasurer Actual Street Address City State ZIP+4

Director Actual Street Address City State ZIP+4

Director Actual Street Address City State ZIP+4

6. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

7. Please complete the appropriate section:

Family Farm Corporation	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	1000
Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name Actual Street Address City State ZIP+4 Shares

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

Dated 09/16/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

Email

DEBRA ROESCH

(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.

9/16/2015 3:19:11 PM

2016

STATEMENT OF CHANGE OF REGISTERED OFFICE

FILE DATE 9/19/2016

Enter Filing Year

Corporation

RECEIPT NO 455805

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

SDCL 47-27-18, 59-11-24

Please Type or Print Clearly In Ink

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

1. Corporate ID and Name:

DF033457

Enter Corporate ID

DDT FARMS, INC.

Enter Corporate Name

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: DEBRA ROESCH

1227 N LLOYD ST ABERDEEN SD 57401-2152
Actual Street Address or Rural Route Box Number City State ZIP+4
PO BOX 546 ABERDEEN SD 57402-0546
Mailing Address, if Different from Street Address City State ZIP+4

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

New Agent Name: DEBRA ROESCH

1516 S HIGH ST ABERDEEEN SD 57401
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

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 09/19/2016

Signature Accepted Electronically

(Signature of an Authorized Person)

DEBRA ROESCH

(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.

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2016

ANNUAL FARM REPORT

FILE DATE 9/19/2016

Enter Filing Year

Corporation

RECEIPT NO 455805

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

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

1. Corporate ID and Name:

DF033457

Enter Corporate ID

DDT FARMS, 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).

12884 342 AVE

ROSCOE

SD

57471

Actual Street Address or Rural Route Box Number

City

State

ZIP+4

PO BOX 546

ABERDEEN

SD

57402-0546

Mailing Address, if Different from Street Address

City

State

ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name:

DEBRA ROESCH

1516 S HIGH ST

ABERDEEN

SD

57401

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. 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"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	President	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	Vice President	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	Secretary	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>	DEBRA ROESCH	PO BOX 546	ABERDEEN	SD	57402
	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

6. List only the changes since the last report of the acreage and location by section, township and county of each lot or parcel of land in this state owned or leased by the corporation.

7. Please complete the appropriate section:

Family Farm Corporation	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	1000
Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name Actual Street Address City State ZIP+4 Shares

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 09/19/2016

Signature Accepted Electronically

(Signature of an Authorized Person)

DEBRA ROESCH

(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.

9/19/2016 4:34:08 PM