

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF REINSTATEMENT

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, hereby certify that duplicate of the Application for Reinstatement of MINKOTA FISHERIES, 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 Reinstatement and attach hereto a duplicate of the Application for Reinstatement of MINKOTA FISHERIES, 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 January 7, 1994.


JOYCE HAZELTINE
Secretary of State

9 4 0 1 2 6 1 1 4 3 1

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

RECEIVED

JAN 7 1994

Secretary of State

APPLICATION FOR REINSTATEMENT

Filed to Jan ^{7th} day of

1. The name of the corporation is Minkota Fisheries, Inc.
2. The date of its administrative dissolution November 15, 1993
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 The grounds for dissolution have been eliminated by filing all required reports and paying all fees and penalties.
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 5, 1994

Richard Fagen
Richard Fagen
President
(title)

Filing Fee: Based on authorized capital stock

STATE OF SOUTH DAKOTA
COUNTY OF HAAKON ^{SC}

I, Myron C. Lindquist, a notary public, do hereby certify that on this 5th day of December JAN 19 94 personally appeared before me Richard Fagen who, being by me first duly sworn, declared that he/she is the President of Minkota Fisheries, Inc. that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires [REDACTED]

Myron C Lindquist
Notary Public

(Notarial Seal)

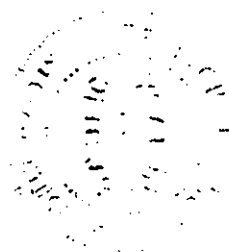
Submit one original and one exact or conformed copy for filing with the certificate from the Department of Revenue and all delinquent annual reports, filing fees and penalties.

BA

STATE OF TEXAS

County of _____

Know all men by these presents, that _____ of the County of _____ State of Texas, for and in consideration of the sum of _____ Dollars, to _____ in hand paid by _____ the receipt of which is hereby acknowledged, have granted, sold and conveyed, and by these presents do grant, sell and convey unto the said _____ of the County of _____ State of Texas, all that certain _____



9 4 0 1 2 6 | 1 2 3 1



DEPARTMENT OF REVENUE
700 GOVERNORS DRIVE
PIERRE, SD 57501-2297
(605) 773-3311

**CORPORATION
REINSTATEMENT TAX
CERTIFICATION FORM**

RECEIVED

JAN 7 1994

Secretary of State

Minkota Fisheries, Inc.
P.O. Box 279
Philip, SD 57567

DATE: December 20, 1993

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) *12-21-93 JR*
- owes the following: _____

SPECIAL TAXES DIVISION

- owes no taxes
- unknown (no records could be found) *2JC 12-21-93*
- owes the following: _____

MOTOR VEHICLE DIVISION

- owes no taxes
- unknown (no records could be found) *12-23-93 PB 12-21-93 DE*
- owes the following: _____

South Dakota Department of Revenue

By: *[Signature]*

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.

THE UNIVERSITY OF CHICAGO
DEPARTMENT OF CHEMISTRY
5800 S. UNIVERSITY AVENUE
CHICAGO, ILLINOIS 60637

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Receipt No: 360218

File Number: DB029434

REINSTATEMENT AND ANNUAL REPORTS

For

MINKOTA FISHERIES, INC.

File at the request of:

RALPH A KEMNITZ
MYRON LINDQUIEST
PO BOX 489
PHILIP SD 57567

STATE OF SOUTH DAKOTA

SS.

OFFICE OF THE SECRETARY OF STATE

Filed in the office of Secretary of State on

Date January 7, 1994

Joyce Hazeltine
Secretary of State

Fee Recieved \$80 RI, 180 AR

SOS CRP 491 10/93

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

19930 1 2 6 1 1
ANNUAL REPORT

FILE DATE 1/7/94
 RECEIPT NO. 36218

DOMESTIC
 PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
 ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

RECEIVED
 JAN 7 1994

1. Corporate Name, Registered Agent and Registered Address:

DB029434 MINKOTA FISHERIES, INC.
 ROY J JOHNSON
 BOX 279
 PHILIP SD 57567

Telephone # _____
 FAX # _____
 Federal Taxpayer ID _____
 FILING DATE: Due during the month the
 Certificate of Incorporation was issued,
 and delinquent 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 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 Aquaculture, business is still in the development stage.

3. The names and addresses of its directors and officers. (Both officers and directors must be listed in the spaces provided).

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP + 4
<u>Roy J. Johnson</u>	Director	<u>PO Box 279, Philip,</u>	<u>SD</u>	<u>57567-0279</u>	
<u>Richard Fagen</u>	Director	<u>Rt 3, Granite Falls,</u>	<u>MN</u>	<u>56241</u>	
<u>Richard Fagen</u>	President	<u>Rt 3, Granite Falls,</u>	<u>MN</u>	<u>56241</u>	
<u>Roy J. Johnson</u>	Vice President	<u>PO BOX 279, Philip,</u>	<u>SD</u>	<u>57567-0279</u>	
<u>Elaine Fagen</u>	Secretary	<u>Rt 3, Granite Falls,</u>	<u>MN</u>	<u>56241</u>	
<u>Marlys Johnson</u>	Treasurer	<u>Rt 5, Box 76A, Montevideo,</u>	<u>MN</u>	<u>56265</u>	

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	CLASS	SERIES	PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE
<u>5,000</u>	<u>DNA</u>	<u>DNA</u>	<u>No Par</u>

5. NUMBER OF SHARES ISSUED None

6. The amount of its stated capital is \$ None

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 5 19 94
 By Richard Fagen
 (Signature) Richard Fagen
 its President
 (Title)

STATE OF South Dakota
 COUNTY OF Haakon ss

I, Myron C. Lindquist, a notary public, do hereby certify that on this 5th day of January 19 94,

personally appeared before me Richard Fagen who, being by me first duly sworn, declared that he/she is the President of Minkota Fisheries, Inc

that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 5-13-98

Myron C. Lindquist
 Notary Public

SECRETARY OF STATE
STATE CAPITOL
600 E. CAPITOL
PIERRE, S.D. 57501-6077
605-773-4845

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

FILING FEE: \$5 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 street address, or a statement that there is no street address, to which the registered office is to be changed is _____
_____ 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 must be signed by the chairman of the board of directors, or by its president, or by another of its officers in the presence of a notary public.

Date _____ 19 _____

(signature)

(title)

STATE OF _____
COUNTY OF _____ ss

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

1993 ANNUAL REPORT
ANNUAL REPORT

FILE DATE 1/7/94
RECEIPT NO. 366218

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

RECEIVED
JAN 7 1994
Secretary of State

1. Corporate Name, Registered Agent and Registered Address:

DB029434 MINKOTA FISHERIES, INC.
ROY J JOHNSON
BOX 279
PHILIP SD 57567-0279

Telephone # _____
FAX # _____
Federal Taxpayer ID _____

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent 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 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 Aquaculture, business is still in the development stage.

3. The names and addresses of its directors and officers: (Both officers and directors must be listed in the spaces provided).

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP + 4
Roy J. Johnson	Director	PO Box 279, Philip,	SD	57567-0279	
Richard Fagen	Director	Rt 3, Granite Falls,	MN	56241	
Richard Fagen	President	Rt 3, Granite Falls,	MN	56241	
Roy J. Johnson	Vice President	PO Box 279, Philip,	SD	57567-0279	
Elaine Fagen	Secretary	Rt 3, Granite Falls,	MN	56241	
Marlys Johnson	Treasurer	Rt 5, Box 76A, Montevideo,	MN	56265	

4. The aggregate number of shares which it has authority to issue, itemized by classes, per value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE	CLASS	SERIES	PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE
5,000	DNA	DNA	No Par

5. NUMBER OF SHARES ISSUED None

6. The amount of its stated capital is \$ none

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 5 19 94

By [Signature]
(Signature) Richard Fagen
its President
(Title)

STATE OF South Dakota
COUNTY OF Haakon ss

I, Myron C. Lindquist, a notary public, do hereby certify that on this 5th day of January 19 94, personally appeared before me Richard Fagen who, being by me first duly sworn, declared that he/she is the President of Minkota Fisheries, Inc.

that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.
My Commission Expires 5-13-98
[Signature]
Notary Public

(Notarial Seal)

SECRETARY OF STATE
STATE CAPITOL
600 E. CAPITOL
PIERRE, S.D. 57501-6077
605-773-4845

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

FILING FEE: \$5 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 street address, or a statement that there is no street address, to which the registered office is to be changed is _____
_____ 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 must be signed by the chairman of the board of directors, or by its president, or by another of its officers in the presence of a notary public.

Date _____ 19 _____

(signature)

(title)

STATE OF _____
COUNTY OF _____ ss

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

~~1993~~ 1994
ANNUAL REPORT

DOMESTIC
 PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
 ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE 1/7/94
 RECEIPT NO. 300218

RECEIVED
 JAN 7 1994
 Secretary of State

1. Corporate Name, Registered Agent and Registered Address:

DB029434 MINNOKOTA FISHERIES, INC.
 ROY J. JOHNSON
 BOX 279
 PHILIP SD 57567

Telephone # _____
 FAX # _____
 Federal Taxpayer ID _____
 FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent 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 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 Aquaculture, business is still
 in the development stage.

3. The names and addresses of its directors and officers: (Both officers and directors must be listed in the spaces provided).

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP + 4
Roy J. Johnson	Director	PO BOX 279, Philip,	SD	57567-0279	
Richard Fagen	Director	Rt 3, Granite Falls,	MN	56241	
Richard Fagen	President	RT 3, Granite Falls,	MN	56241	
Roy J. Johnson	Vice President	PO Box 279, Philip,	SD	57567-0279	
Elaine Fagen	Secretary	Rt 3, Granite Falls,	MN	56241	
Marlys Johnson	Treasurer	RT 5, BOX 75A, Montevideo,	MN	56265	

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	CLASS	SERIES	PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE
5,000	DNA	DNA	No Par

5. NUMBER OF SHARES ISSUED

None

6. The amount of its stated capital is \$ none

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 5 19 94

By [Signature]
 (Signature) Richard Fagen
 its President
 (Title)

STATE OF South Dakota
 COUNTY OF Haakon

I, Myron C. Lindquist, a notary public, do hereby certify that on this 5th day of January 19 94,
 personally appeared before me Richard Fagen who, being by me first duly sworn, declared that he/she is the
President of Minnkota Fisheries, Inc.

that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.
 My Commission Expires 5-13-98
[Signature]
 Notary Public

(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**

FILING FEE: \$5 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 street address, or a statement that there is no street address, to which the registered office is to be changed is _____
_____ 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 must be signed by the chairman of the board of directors, or by its president, or by another of its officers in the presence of a notary public.

Date _____ 19 _____

(signature)

(title)

STATE OF _____
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)

9 4 0 1 2 6 1 0 1 8 1
Secretary of State

State Capitol, Ste 204
500 East Capitol Avenue
Pierre, South Dakota
57501-5070
TDD (605) 773-5010



JOYCE HAZELTINE
Secretary of State

TOM LECKEY
Deputy

DB-029434
MINKOTA FISHERIES, INC.
JOHNSON, ROY J.
BOX 279
PHILIP, SD 57567-0279

July, 1993

DOMESTIC BUSINESS

NOTICE OF ADMINISTRATIVE DISSOLUTION

This is to notify you that the above named corporation is delinquent in filing the corporate report(s) as required by South Dakota Codified Law 47-9-1. South Dakota law states that a corporation may be Administratively Dissolved for failure to file its corporate report within sixty days after it is due. Pursuant to SDCL 47-7-29.1 the corporation will be administratively dissolved October 1, 1993.

The delinquent corporate reports along with the \$60 fee for each will need to be filed PRIOR to October 1st to avoid administrative dissolution. 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.

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

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

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

94012610131

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.

DB-029434
MINKOTA FISHERIES, INC.
JOHNSON, ROY J.
BOX 272
PHILIP, SD 57567-0279



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 15th day of November, 1993.

Joyce Hazeltine
JOYCE HAZELTINE
Secretary of State

DB-029434

1. The first part of the document is a list of names and addresses of the members of the committee.

2. The second part of the document is a list of names and addresses of the members of the committee.

3. The third part of the document is a list of names and addresses of the members of the committee.

4. The fourth part of the document is a list of names and addresses of the members of the committee.

5. The fifth part of the document is a list of names and addresses of the members of the committee.

6. The sixth part of the document is a list of names and addresses of the members of the committee.

7. The seventh part of the document is a list of names and addresses of the members of the committee.

8. The eighth part of the document is a list of names and addresses of the members of the committee.

9. The ninth part of the document is a list of names and addresses of the members of the committee.

10. The tenth part of the document is a list of names and addresses of the members of the committee.

150-2700926
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

DB-029434
MINNOKTA FISHERIES, INC.
JOHNSON, ROY J.
BOX 279
PHILIP, SD 57507-0279

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 6580

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

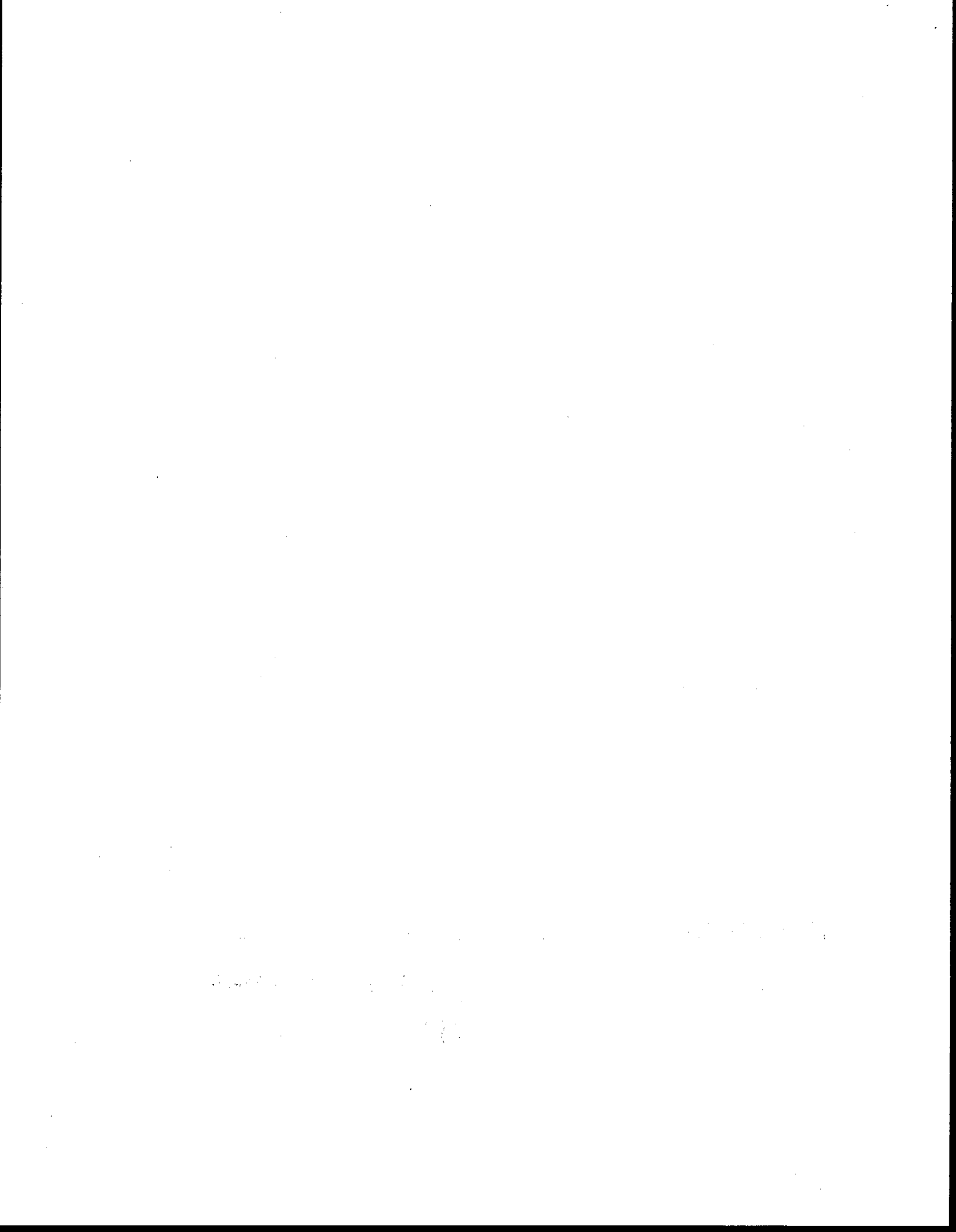
I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, by virtue of the authority vested in me by SDCL 47-7-30.1 hereby Administratively Dissolve the below named corporation for failure to file the corporate annual report when due.

DB-029434
MINNOKTA FISHERIES, INC.
JOHNSON, ROY J.
BOX 272
PHILIP, SD 57567-0279

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 Hazeltime
JOYCE HAZELTINE
Secretary of State





Receipt Number: 1498504

File Number **DB029434**



APPLICATION_FOR_REINSTATEMENT

For

MINKOTA FISHERIES, INC.

Filed at the request of:

**MINKOTA FISHERIES, INC.
PO BOX 310
PHILIP SD 57567**

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

Filed in the office of the Secretary of State on: **December 01, 2005**

Secretary of State

Fee Received: \$250

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

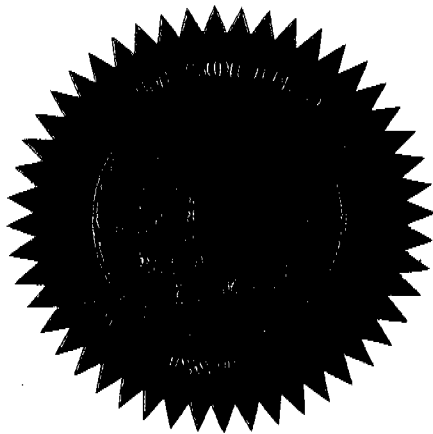
Certificate of Reinstatement

ORGANIZATIONAL ID #: DB029434

I, **Chris Nelson**, Secretary of State of the State of South Dakota, hereby certify that duplicate of the Application for Reinstatement of **MINKOTA FISHERIES, INC.** duly signed and verified, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I hereby issued this Certificate of Reinstatement and attach hereto a duplicate of the Application for Reinstatement.

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 December 1, 2005.



Chris Nelson

Chris Nelson
Secretary of State

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

Filed this 1st day of
Dec. 2005

RECEIVED

DEC 01 '05

S.D. SEC. OF STATE

Application for Reinstatement
Ch. Nelson
SECRETARY OF STATE

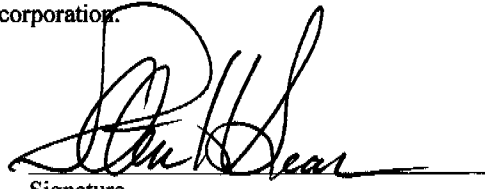
FILING FEE: \$250

FILING INSTRUCTIONS: Submit one original and one exact or conformed copy for filing with the certificate from the Department of Revenue along with all delinquent annual reports and filing fees.

1. The name of the corporation is Minkota Fisheries, Inc
2. The effective date of its administrative dissolution 1Jun95
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 Failure to file annual reports and payment of fees..
4. The corporation's name satisfies the requirements of the South Dakota Business Corporations Act.
5. Attached hereto is a certificate from the South Dakota Department of Revenue reciting that any and all taxes owed by the corporation have been paid.

Application may be signed by any authorized officer of the corporation.

Date: 10/15/05

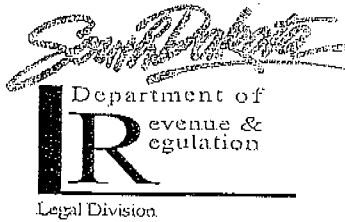

Signature

PATRICK H. SEAFORD
Printed Name

TKEA
Title

db029434
200 r.
3094
95
96
97
98
99
00
01
02
03
04
05
10
SC

342 4750



Corporation Reinstatement Tax Certification Form

445 EAST CAPITOL AVENUE
PIERRE, SD 57501-3185
(605) 773-4701

Date: October 13, 2005

Min-Kota Fisheries, Inc.
PO Box 310
Philip, SD 57567-0310

FEIN:

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

Business Tax Division

- owes no taxes
- unknown (no records could be found) *slw*
- owes the following: _____

Special Taxes Division

- owes no taxes
- unknown (no records could be found) *emk*
- owes the following: _____

Motor Vehicle Division

Motor Fuel

- owes no taxes
- unknown (no records could be found) *AE*
- owes the following: _____

IFTA

- owes no taxes
- unknown (no records could be found) *LB*
- owes the following: _____

Prorate

- owes no taxes
- unknown (no records could be found)
- owes the following: _____

*RC 6
10-12-05*

South Dakota
Department of Revenue & Regulation

By: Bret Aldahl Date: 10/17/05

This certification extends only to taxes administered and collected by the Department of Revenue & Regulation. 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.

342 4751

Receipt Number: 14985204

File Number **DB029434**



STATEMENT_OF_CHANGE

For

MINKOTA FISHERIES, INC.

Filed at the request of:

**MINKOTA FISHERIES, INC.
PO BOX 310
PHILIP SD 57567**

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

Filed in the office of the Secretary of State on: **December 01, 2005**

Secretary of State

Fee Received: \$10

342 4747 12/02/2005

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. RECEIVED

DEC 15 2005

Filed this 15th
Dec. 2005
Chris Minkota
SECRETARY OF STATE

FILING FEE: \$10 In addition to annual report fee

S.D. SEC. OF STATE

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.

- The name of the corporation is Minkota Fisheries, Inc
PO Box 279
- The street address, or a statement that there is no street address, of its current registered office PO Box 310
(no street address) Philip, South Dakota ZIP + 4 57567-0310
- 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. Same
ZIP + 4 _____
- The name of its current registered agent is Roy J. Johnson
- The name of its new registered agent is * Richard Fagen

*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 10/15/05

Patrick H. Seager

Signature

PATRICK H. SEAGER

Printed Name

TREA

Title

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

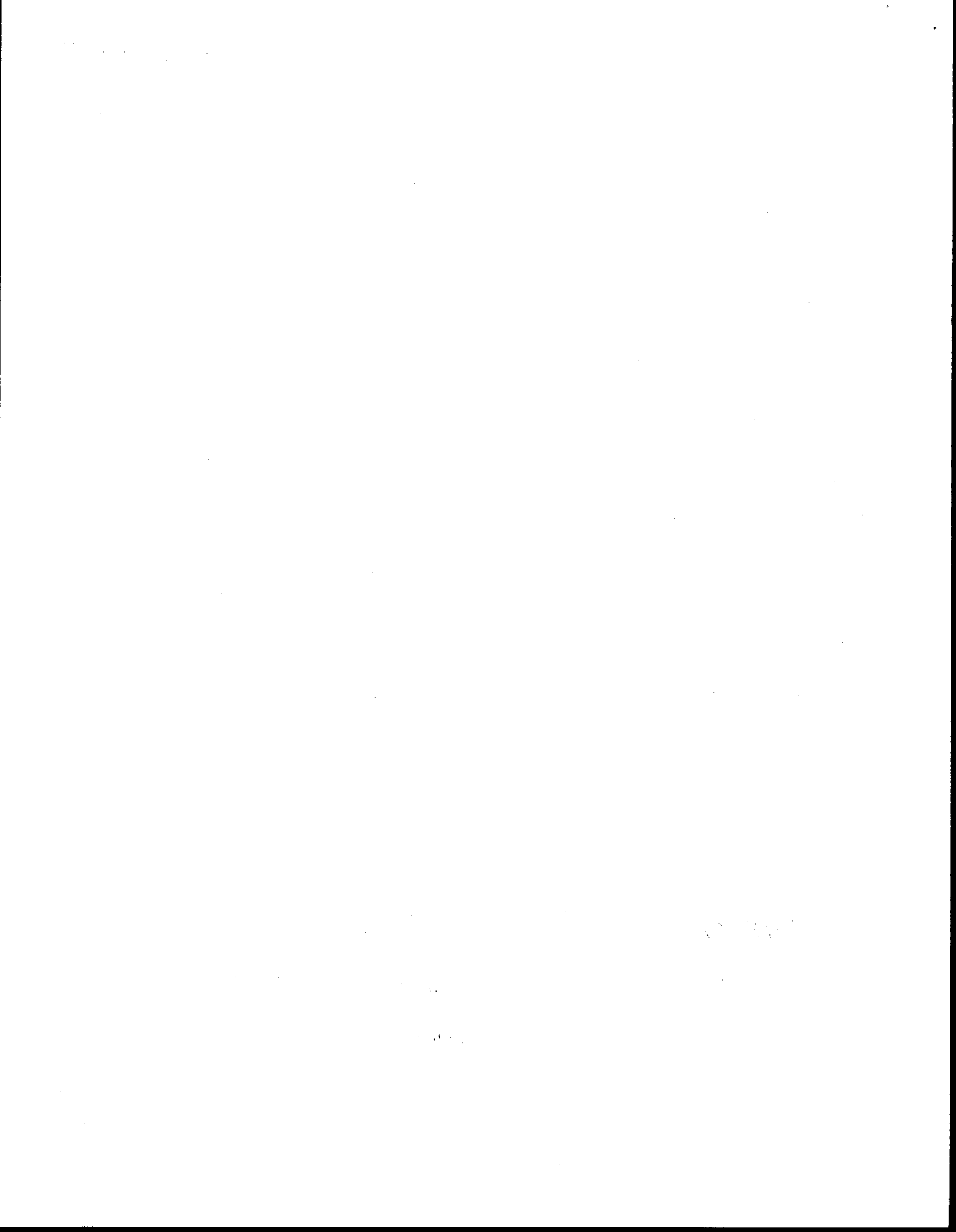
I, Richard Fagen, hereby give my consent to serve as the
(name of registered agent)

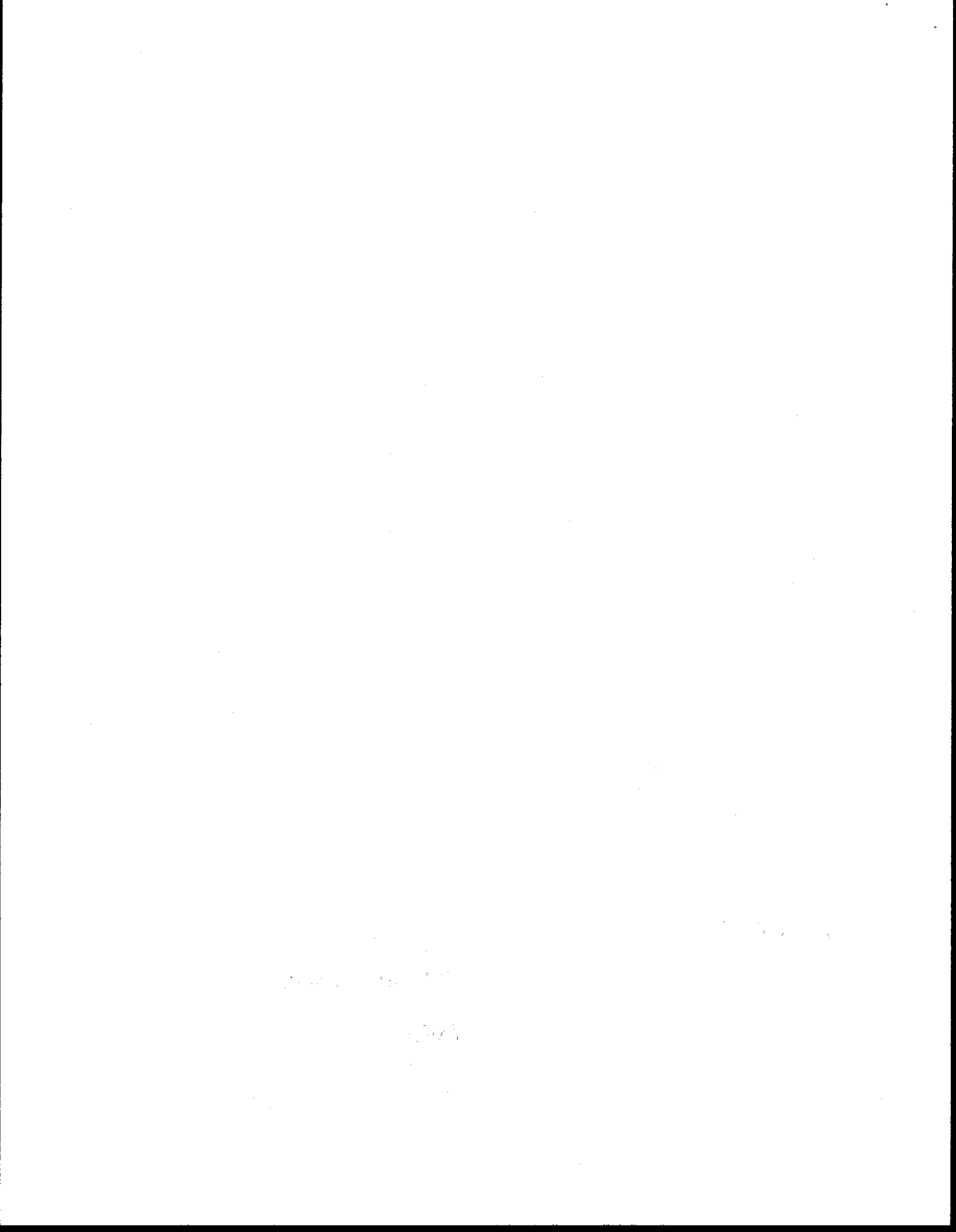
registered agent for Minkota Fisheries, Inc
(corporate name)

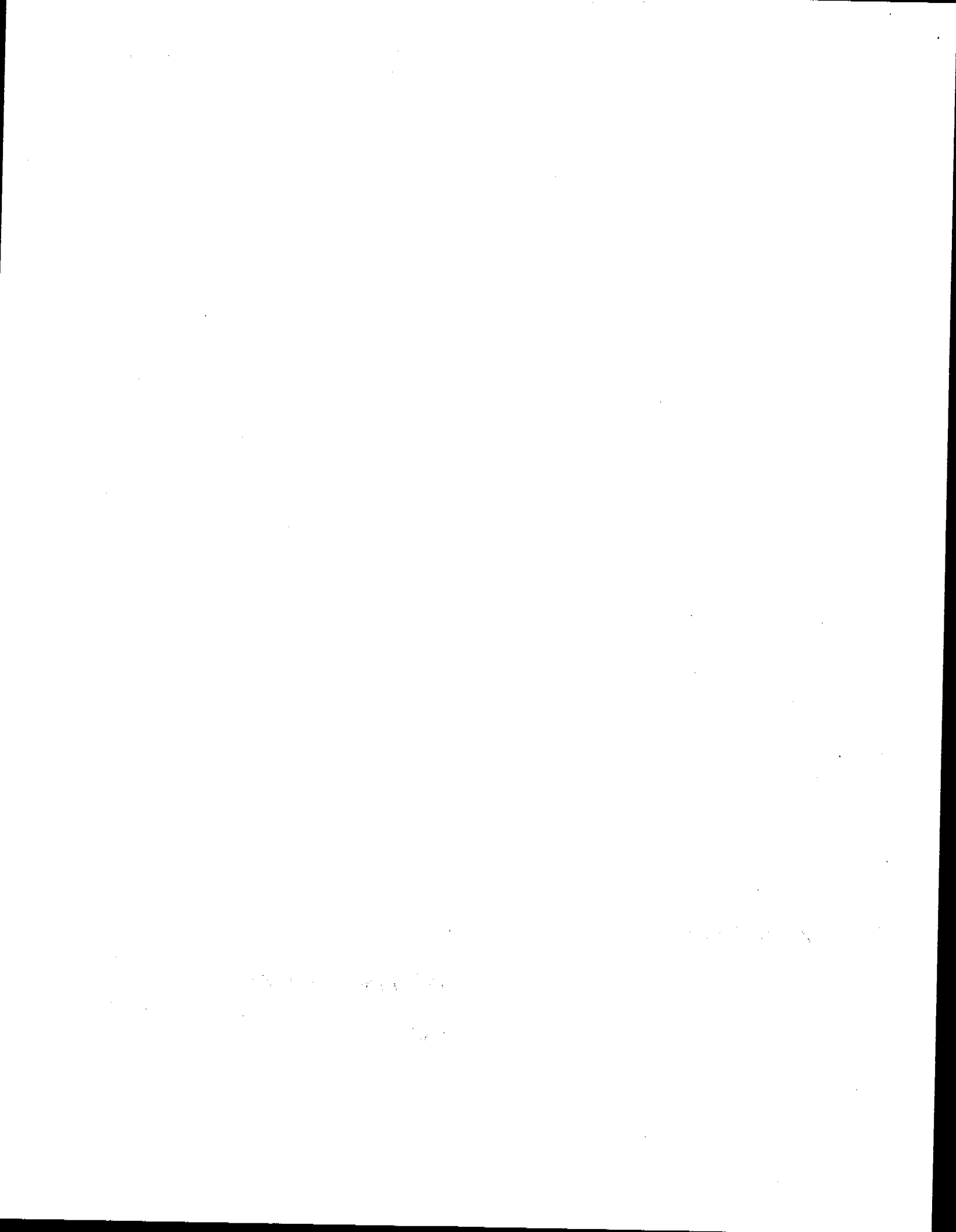
Dated 10/15/05

Richard Fagen

(signature)

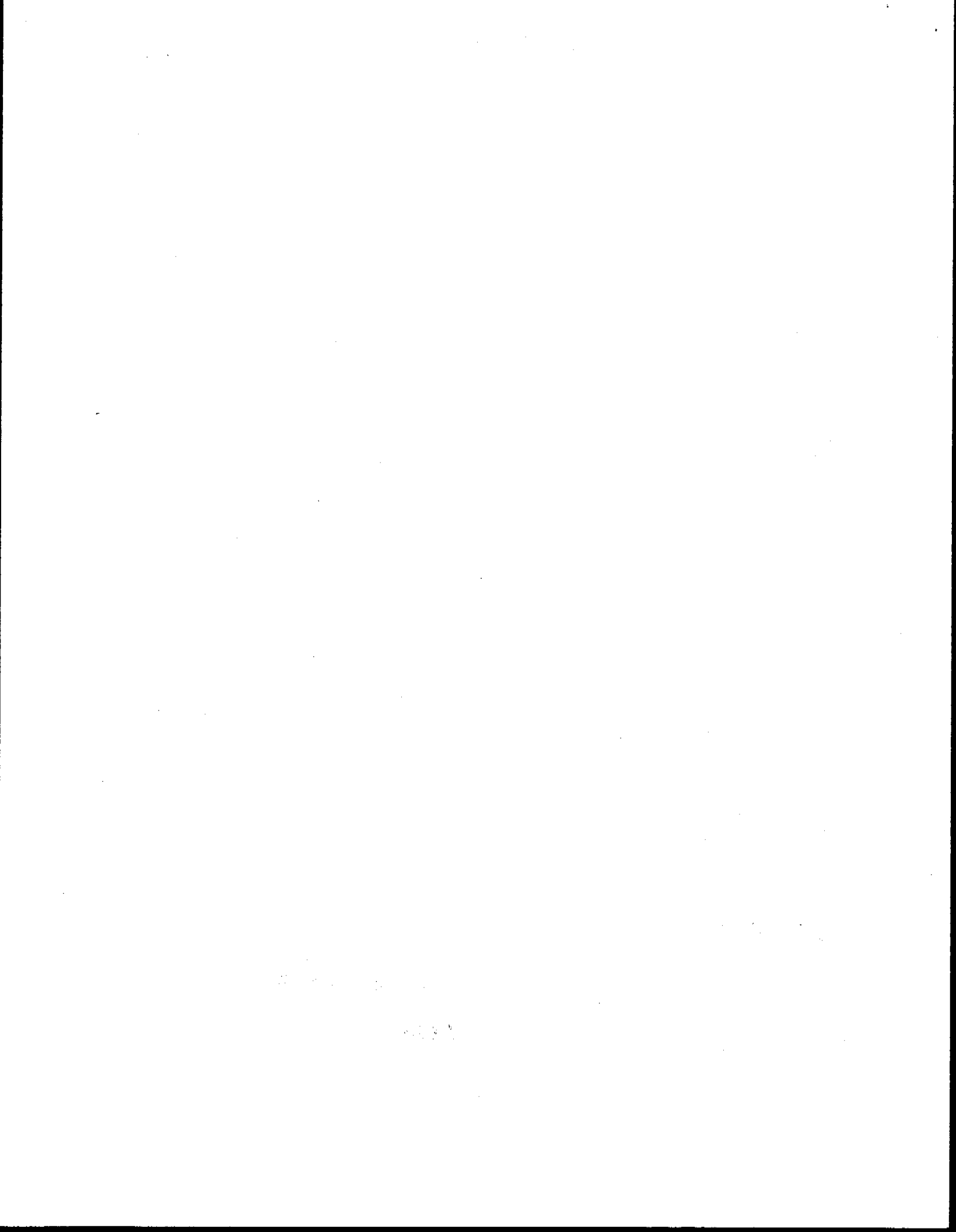


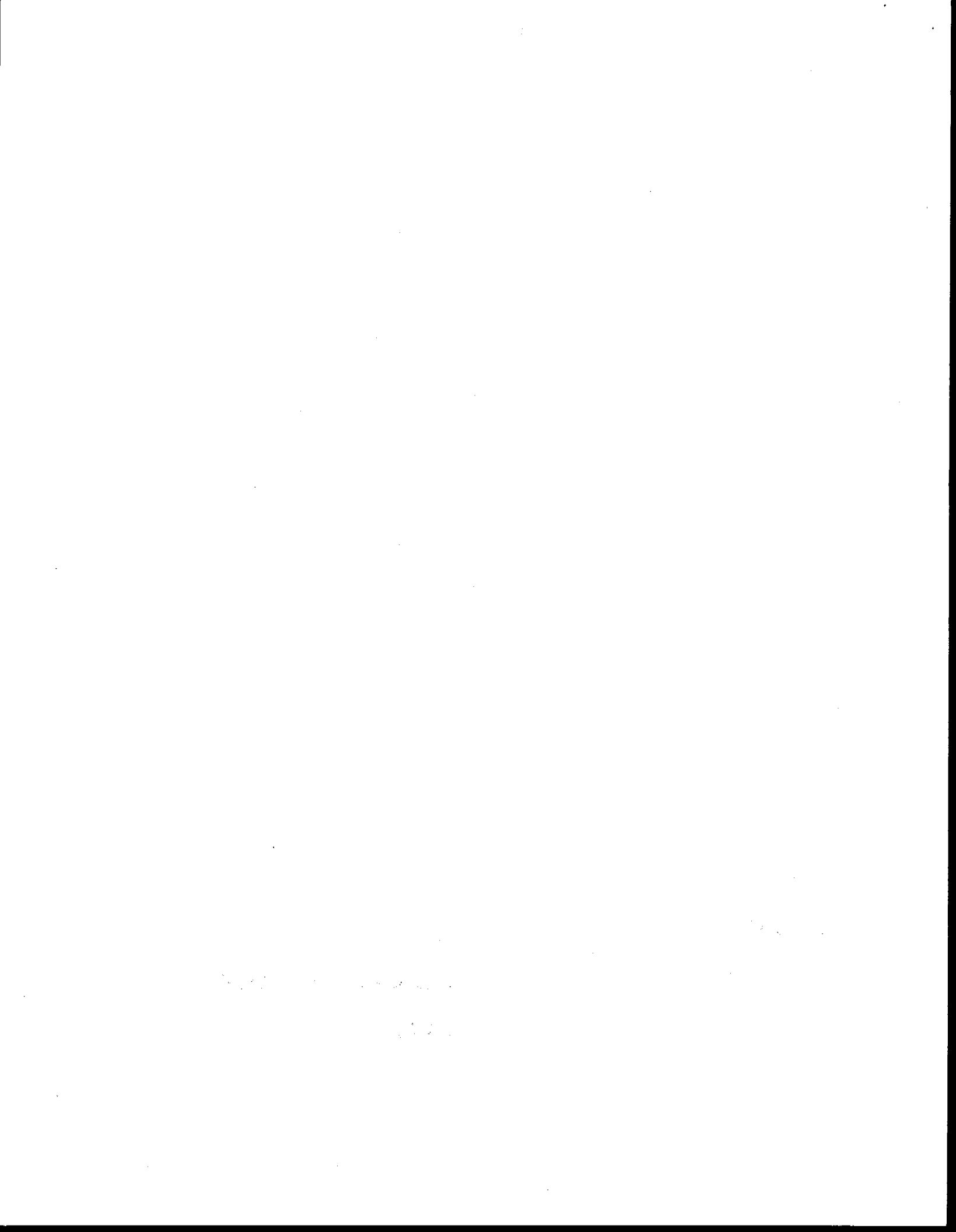




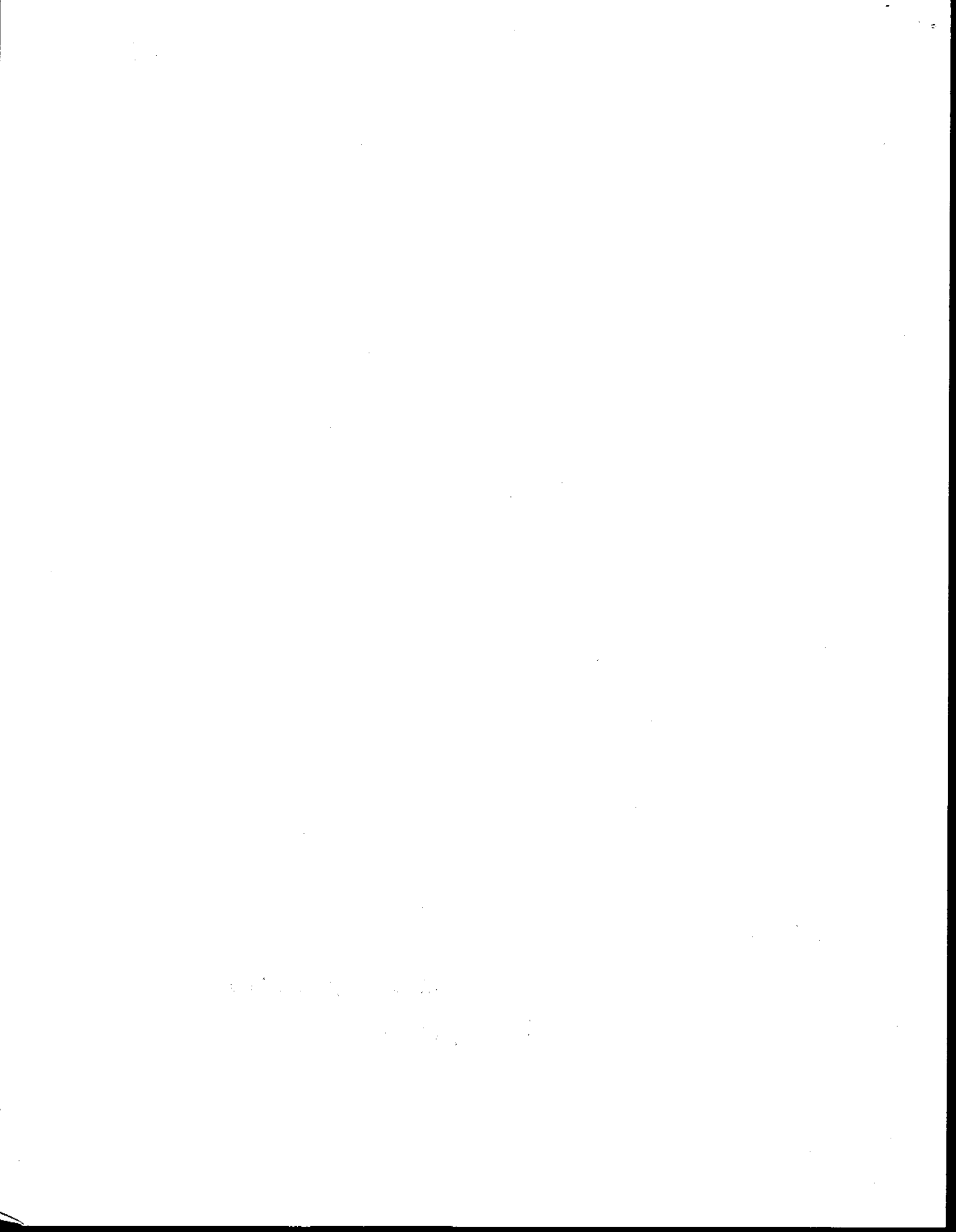
10/10/10

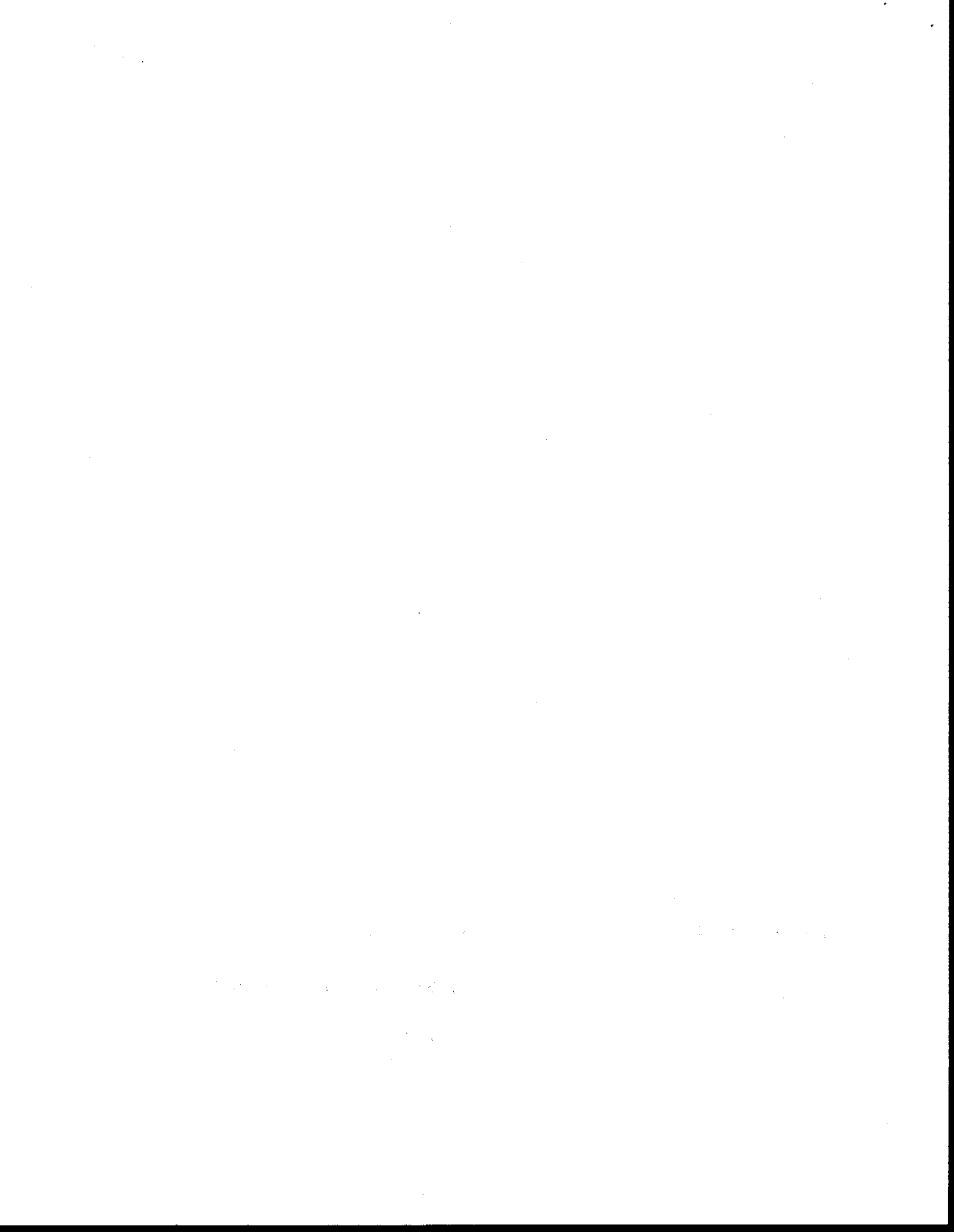
10/10/10





THE UNIVERSITY OF CHICAGO
LIBRARY





2006 ANNUAL REPORT

DOMESTIC PLEASE TYPE OR USE BLACK INK

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

FILE DATE 4-1-06 RECEIVED 595-289 MAR 27 06 S.D. SEC. OF STATE

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

DBO29434 APR/2005 MINKOTA FISHERIES, INC. FAGEN, RICHARD PO BOX 310 PHILIP, SD 57567-0310

Telephone # 605.859.2675 FAX # 605.859.2675

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

***** ATTENTION - FILING INSTRUCTIONS *****

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report. To report a change in the registered agent and/or office, a statement of change must be filed. Any change requires full completion of 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 address of the principal office 22241 Lake Waggoner Rd, Philip, SD 57567

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

Table with columns: NAME, OFFICE, STREET ADDRESS, CITY, STATE, ZIP+4. Rows include Richard Fagen (President), Elaine Fagen (Vice President), Julie A. Seager (Secretary), and Patrick H. Seager (Treasurer).

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

SD law requires at least one director.

Do the above listed officers serve also as directors? YES NO If no, list directors below.

Director _____ Director _____

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

Table with columns: NUMBER OF AUTHORIZED SHARES, CLASS, SERIES. Row: 5,000, Common, No Par Value.

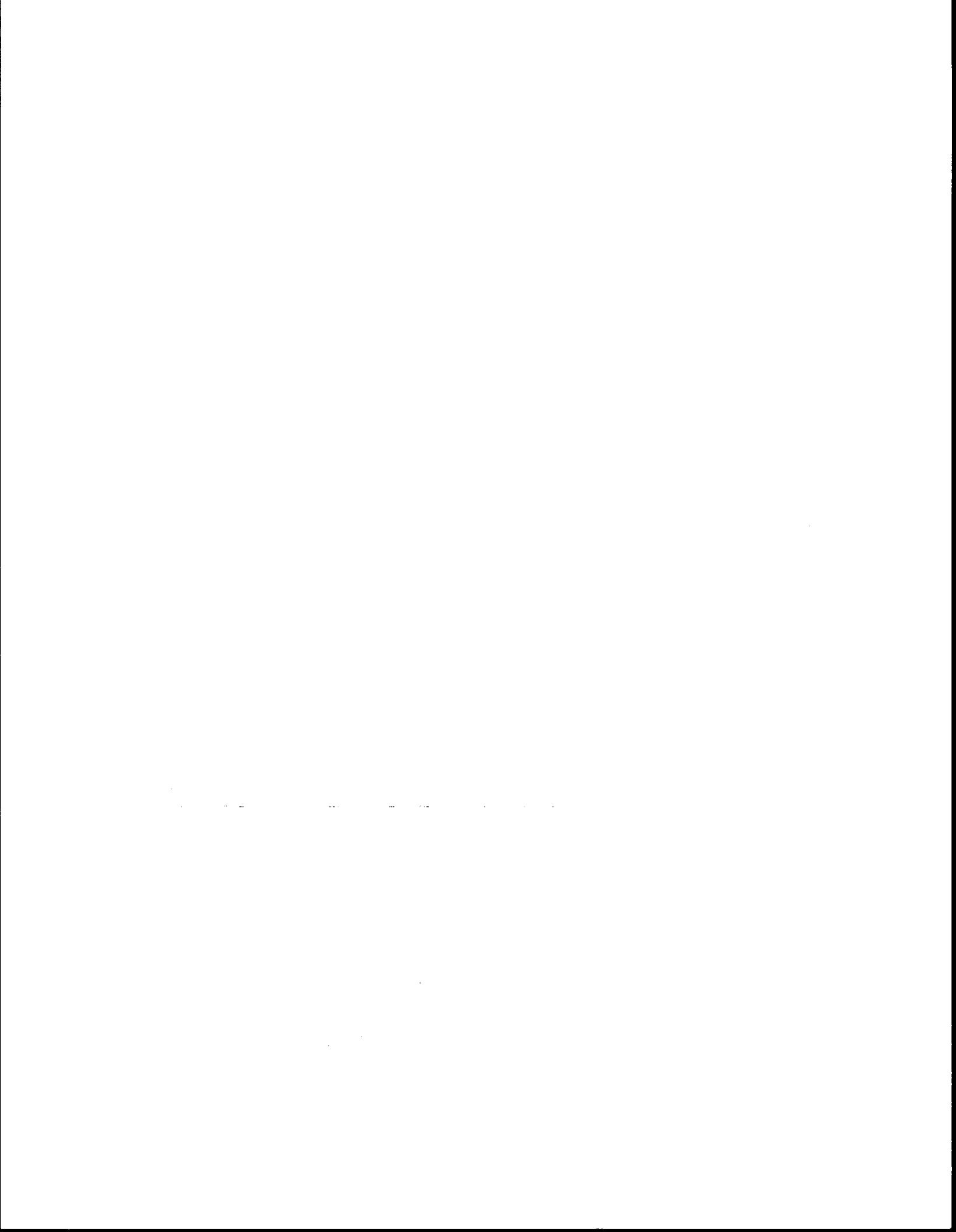
6. NUMBER OF ISSUED AND OUTSTANDING SHARES

Table with columns: NUMBER OF ISSUED AND OUTSTANDING SHARES, CLASS, SERIES. Row: 5,000, Common, No Par Value.

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

Dated 3/23/06

Signature: Patrick H. Seager Printed Name: Patrick H. Seager Title: Treasurer/Manager



2007

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

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



* D B 0 2 9 4 3 4 *
DB029434 APR/2006
MINKOTA FISHERIES, INC.
FAGEN, RICHARD
PO BOX 310
PHILIP SD 57567-0310

Telephone # 605 859 2675
FAX # _____

FILE DATE 04/01/07
RECEIPT NO. 662551
RECEIVED
MAR 28 2007
S.D. SEC. OF STATE

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:

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. 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 3-26-07

Signature

PATRICK H. SEAGER
Printed Name

TREA.
Title

260 2812

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

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

File Date _____
Receipt No. _____

FILING FEE: \$10 In addition to annual report fee

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

1. The name of the corporation is _____
2. The street address, or a statement that there is no street address, of its current registered office _____
_____ ZIP + 4 _____
3. The new address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address, if street addresses have not been assigned, or the RR address, must also be included. _____
_____ ZIP + 4 _____
4. The name of its current registered agent is _____
5. The name of its new registered agent is * _____

***The Consent of Registered Agent below must be completed by the new agent.**

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

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

Dated _____

Signature

Printed Name

Title

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

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

registered agent for _____
(corporate name)

Dated _____

(signature)

**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)

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

ANNUAL REPORT DOMESTIC

Please Type or Print Clearly in Ink

2009

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

RECEIVED

APR 16 2009

S.D. SEC. OF STATE

FILE DATE 4/16/09
RECEIPT NO 1903657

RECEIVED

MAR 23 2009

S.D. SEC. OF STATE

Telephone # (605) 859-2675

FAX # _____

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

1. Corporate ID and Name:

DB029434 APR/2008

Minkota Fisheries, Inc.
Fagen, Richard
PO Box 310
Philip, SD 57567-0310

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

22241 Lake Waggoner Rd	Philip	SD	57567-0310
Street Address	City	State	ZIP+4
PO Box 310	Philip	SD	57567-0310
Mailing Address (Optional)	City	State	ZIP+4

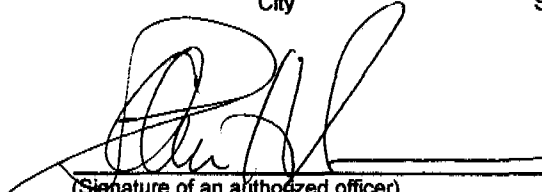
3. The name of the South Dakota Registered Agent Richard Fagen

22241 Lake Waggoner Rd	Philip	SD	57567-0310
Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
PO Box 310	Philip	SD	57567-0310
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"/>	Richard Fagen	13052 50th Ave SE	Granite Falls	SD	56341-3052
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Elaine Fagen	13052 50th Ave SE	Granite Falls	SD	56341-3052
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Julie A. Seager	307 Ash St	Philip	SD	57567-0757
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Patrick H. Seager	307 Ash St	Philip	SD	57567-0757
	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 March 20, 2009


(Signature of an authorized officer)

Patrick H. Seager
(Printed Name)

Treasurer/Gen Mgr
(Title)

289 1479

289 1480

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

Please submit one Original and one Photocopy

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

FILE DATE	4/16/09
RECEIPT	RECEIVED (902851)
APR 16 2009	
S.D. SEC. OF STATE	

Telephone #	_____
FAX #	_____

1. Corporate ID and Name:

DB029434

MINKOTA FISHERIES, INC.
FAGEN, RICHARD
PO BOX 310
PHILIP SD 57567-0310

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

PO BOX 310	PHILIP	SD	57567-0310
Street Address (Required)	City	State	ZIP+4

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

5. If the address has changed, its new address

2224) 2224 LAKE WAGGONER RD PHILIP SD 57567

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
--------------------------------------------------------	------	-------	-------

PO BOX 310	PHILIP	SD	57567-0310
Mailing Address (Optional - Required to be a South Dakota Address)	City	State	ZIP+4

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

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

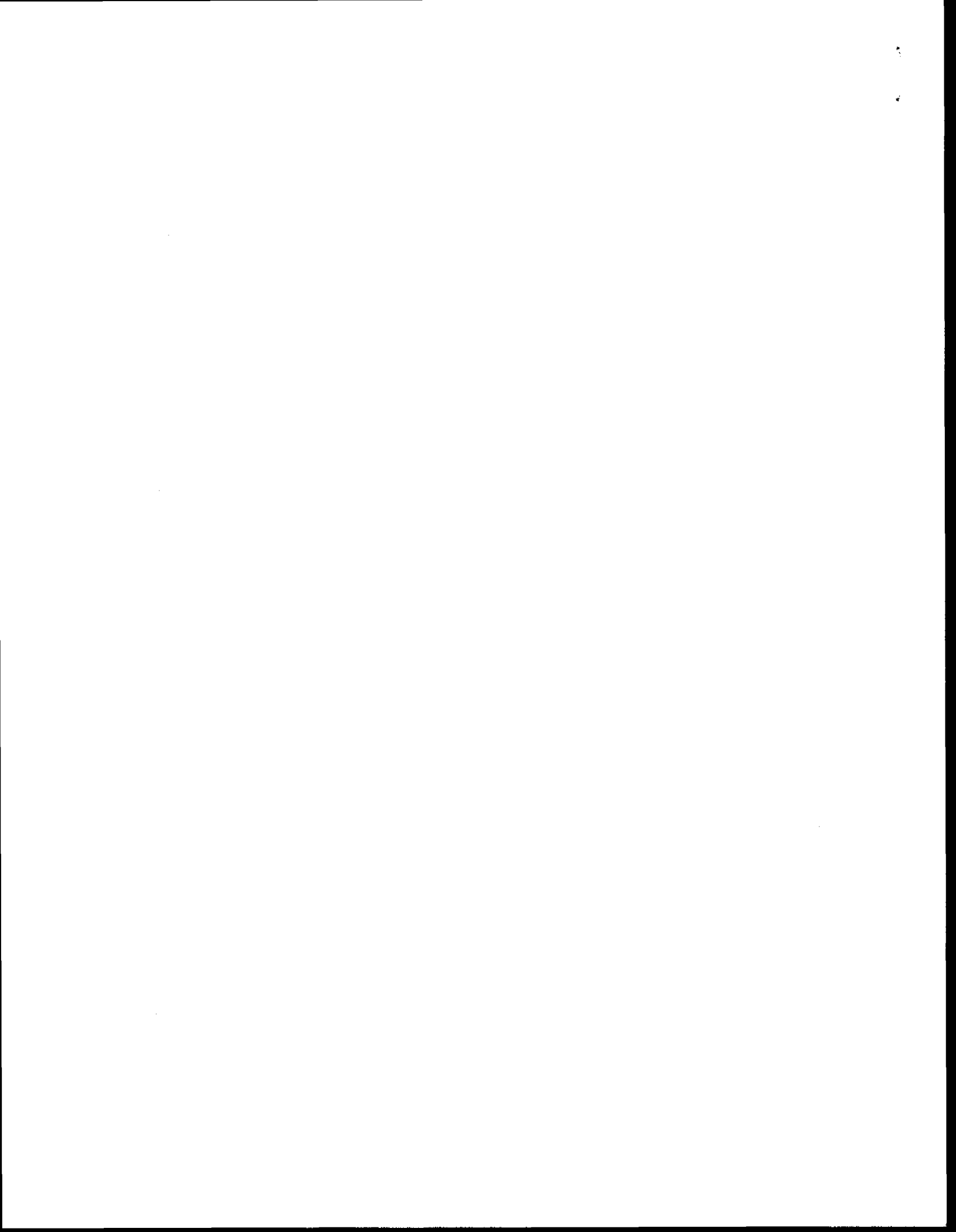
Dated 4/14/09



(Signature of an authorized officer)

PATRICK H. SEASE
(Printed Name)

TBA / Gen Mgr.
(Title)



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

ANNUAL REPORT DOMESTIC

Please Type or Print Clearly in Ink

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

1. Corporate ID and Name:

DB029434 Apr/2009

2010

Minkota Fisheries, Inc
Fagen, Richard
PO Box 310
Philip, SD 57567-0310

FILE DATE	4-12-10
RECEIPT NO	202019
RECEIVED	
APR 12 2010	
S.D. SEC. OF STATE	

Telephone #	(605) 859-2675
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.

22241 Lake Waggoner Rd	Philip	SD	57567-0310
Street Address	City	State	ZIP+4
PO Box 310	Philip	SD	57567-0310
Mailing Address (Optional)	City	State	ZIP+4

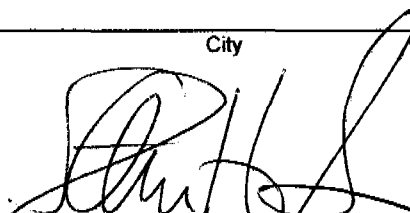
3. The name of the South Dakota Registered Agent Richard Fagen

22241 Lake Waggoner Rd	Philip	SD	57567-0310
Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
PO Box 310	Philip	SD	57567-0310
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"/>	Richard Fagen	13052 50th Ave SE	Granite Falls	MN	56341-3052
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Elaine Fagen	13052 50th Ave SE	Granite Falls	MN	56341-3052
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Julie A Seager	307 Ash St	Philip	SD	57567-0757
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Patrick H Seager	307 Ash St	Philip	SD	57567-0757
	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

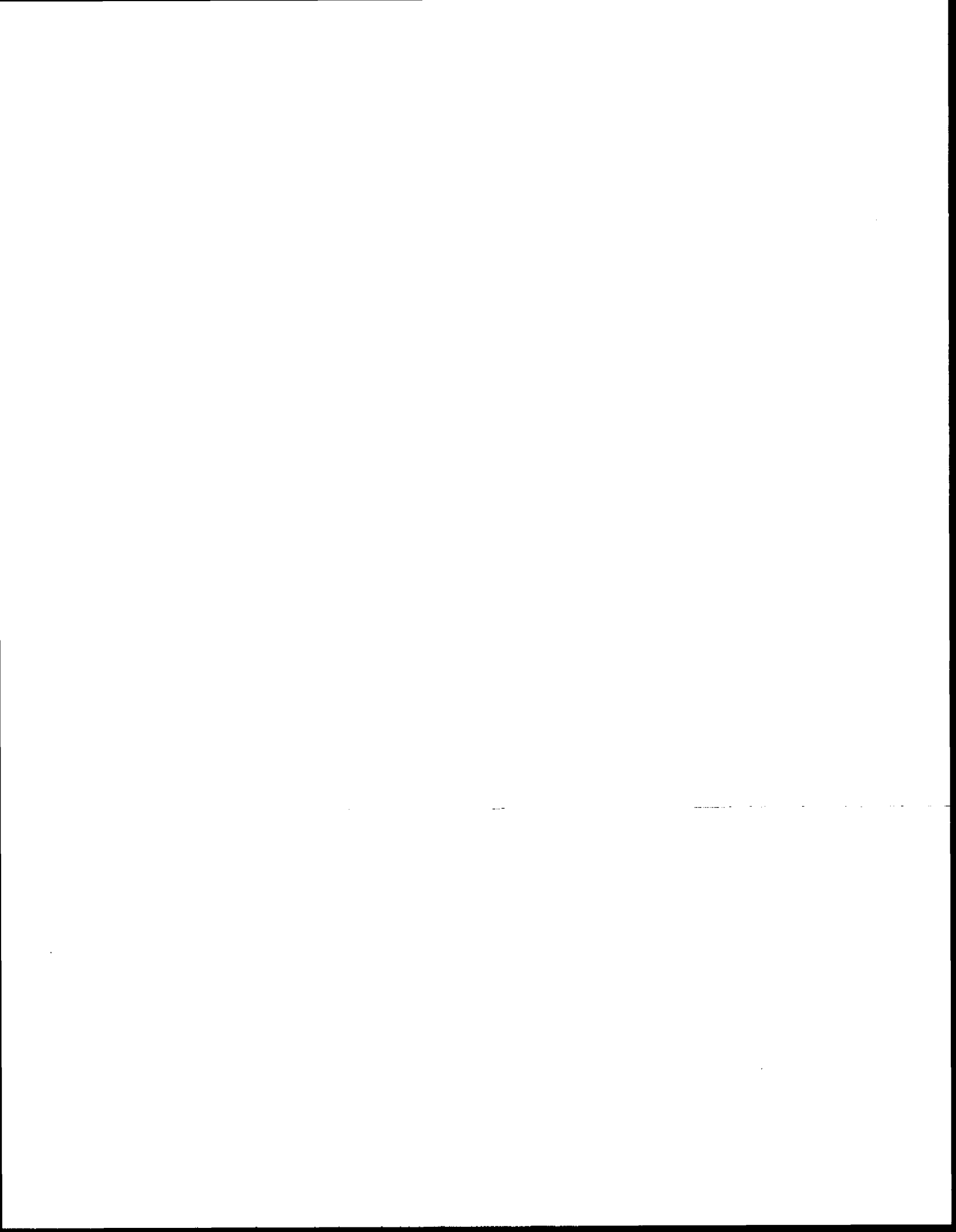
Dated April 9, 2010


 (Signature of an authorized officer)

Patrick H. Seager
(Printed Name)

Treasurer/General Manager
(Title)

304 2005



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 04-21-2011
 RECEIPT NO 2146772
 APR 21 2011
 S.D. DEP. OF STATE

Telephone # (605)859-2675

1. Corporate ID and Name:

DBO29434 APR/2010
Minkota Fisheries, Inc
Fagen, Richard
PO Box 310
Philip, SD 57567-0310

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

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

22241 Lake Waggoner Rd	Philip	SD	57567-0310
Street Address	City	State	ZIP+4
PO Box 310	Philip	SD	57567-0310
Mailing Address	City	State	ZIP+4
Email Address			

4. The name of the South Dakota Registered Agent Richard Fagen

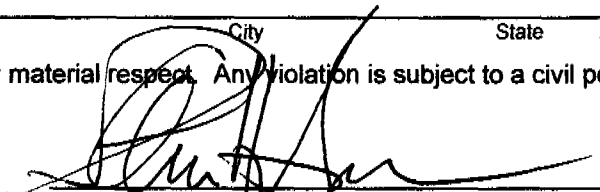
22241 Lake Waggoner Rd	Philip	SD	57567-0310
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO Box 310	Philip	SD	57567-0310
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4
none			
Email Address			

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"/>	Richard Fagen	13052 50th Ave SE	Granite Falls	MN	56341-301
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Elaine Fagen	13052 50th Ave SE	Granite Falls	MN	56341-301
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Julie A Seager	307 Ash St	Philip	SD	57567-071
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Patrick H. Seager	307 Ash St	Philip	SD	57576-071
	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

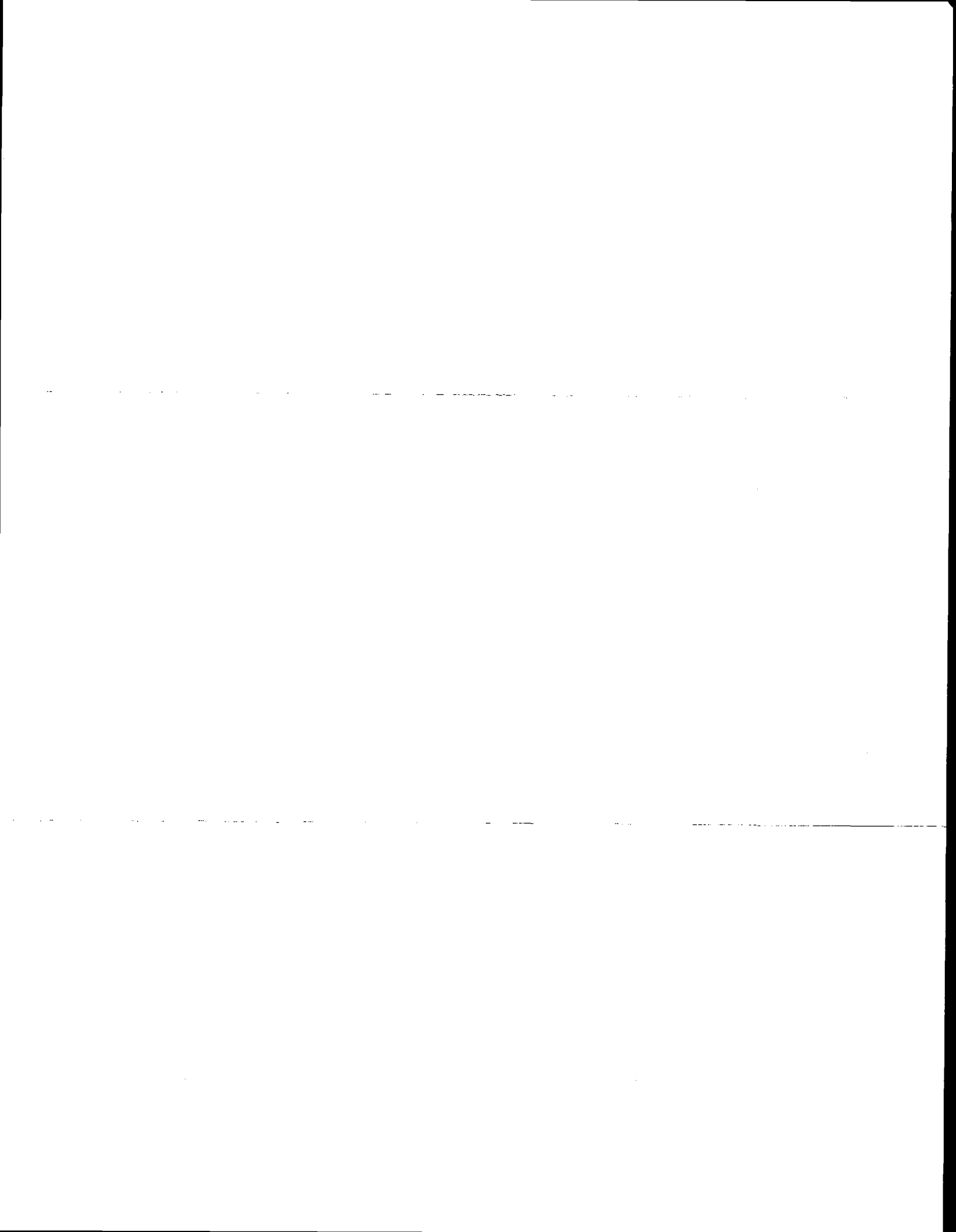
No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated Apr 19, 2011


 (Signature of an Authorized Person)
 Patrick H. Seager
 (Printed Name)

Email

319 3540 03-10-2011



2012

Enter Filing Year

ANNUAL REPORT

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

DOMESTIC

Please Type or Print Clearly In Ink

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

FILE 4/18/2012

RECEIPT NO 36601

1. Corporate ID and Name:
DB029434
MINKOTA FISHERIES, INC.
22241 LAKE WAGGONER RD
PHILIP, SD 57567

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

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

22241 LAKE WAGGONER RD	PHILIP	SD	57567
Street Address	City	State	ZIP+4
PO BOX 310	PHILIP	SD	57567-0310
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: RICHARD FAGEN

22241 LAKE WAGGONER RD	PHILIP	SD	57567
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 310	PHILIP	SD	57567-0310
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

<input checked="" type="checkbox"/>	RICHARD FAGEN	13052 50TH AVE SE	GRANITE FALLS	MN	56341
	President	Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	ELAINE FAGEN	13052 50TH AVE SE	GRANITE FALLS	MN	56341
	Vice President	Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	JULIE A SEAGER	307 ASH ST	PHILIP	SD	57567
	Secretary	Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	PATRICK H SEAGER	307 ASH ST	PHILIP	SD	57567
	Treasurer	Street Address	City	State	ZIP+4

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



Director

Street Address

City

State

ZIP+4

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

Date

Signature Accepted Electronically

(Signature of an Authorized Person)

PATRICK H SEAGER

(Printed Name)

2013

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ANNUAL REPORT

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

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FILE 3/19/2013

RECEIPT NO 103407

1. Corporate ID and Name:
DB029434
MINKOTA FISHERIES, INC.
22241 LAKE WAGGONER RD
PHILIP, SD 57567

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

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

22241 LAKE WAGGONER RD	PHILIP	SD	57567
Street Address	City	State	ZIP+4
PO BOX 757	PHILIP	SD	57567-0757
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: RICHARD FAGEN

22241 LAKE WAGGONER RD	PHILIP	SD	57567
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 310	PHILIP	SD	57567-0310
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

<input checked="" type="checkbox"/>	RICHARD FAGEN	13052 50TH AVE SE	GRANITE FALLS	MN	56341
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	ELAINE FAGEN	13052 50TH AVE SE	GRANITE FALLS	MN	56341
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JULIE A SEAGER	307 ASH ST	PHILIP	SD	57567
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	PATRICK H SEAGER	307 ASH ST	PHILIP	SD	57567
	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

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Date 03/19/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

PATRICK H SEAGER

(Printed Name)

2014

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ANNUAL REPORT

FILE DATE 4/24/2014

RECEIPT NO 195399

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
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1. Corporate ID and Name:

DB029434
MINKOTA FISHERIES, INC.
22241 LAKE WAGGONER RD
PHILIP, SD 57567

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

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

22241 LAKE WAGGONER RD	PHILIP	SD	57567
Street Address	City	State	ZIP+4
PO BOX 310	PHILIP	SD	57567-0310
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: RICHARD FAGEN

22241 LAKE WAGGONER RD	PHILIP	SD	57567
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 310	PHILIP	SD	57567-0310
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

<input checked="" type="checkbox"/>	RICHARD FAGEN	13052 50TH AVE SE	GRANITE FALLS	MN	56341
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	ELAINE FAGEN	13052 50TH AVE SE	GRANITE FALLS	MN	56341
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JULIE A SEAGER	307 ASH ST	PHILIP	SD	57567
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	PATRICK H SEAGER	307 ASH ST	PHILIP	SD	57567
	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

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Dated 04/24/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

PATRICK H SEAGER

(Printed Name)

2015

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ANNUAL REPORT

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

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FILE DATE 5/14/2015

RECEIPT NO 301899

1. Corporate ID and Name:

DB029434
MINKOTA FISHERIES, INC.
22241 LAKE WAGGONER RD
PHILIP, SD 57567

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

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

22241 LAKE WAGGONER RD	PHILIP	SD	57567
Street Address	City	State	ZIP+4
PO BOX 310	PHILIP	SD	57567-0310
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: RICHARD FAGEN

22241 LAKE WAGGONER RD	PHILIP	SD	57567
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 310	PHILIP	SD	57567-0310
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

<input checked="" type="checkbox"/>	RICHARD FAGEN	13052 50TH AVE SE	GRANITE FALLS	MN	56341
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	ELAINE FAGEN	13052 50TH AVE SE	GRANITE FALLS	MN	56341
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JULIE A SEAGER	307 ASH ST	PHILIP	SD	57567
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	PATRICK H SEAGER	307 ASH ST	PHILIP	SD	57567
	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

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Dated 05/14/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

PATRICK H SEAGER

(Printed Name)

2016

Enter Filing Year

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

ANNUAL REPORT

DOMESTIC CORPORATION

SDCL 59-11-24, 24.1

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FILE DATE 4/9/2016

RECEIPT NO 402662

1. Corporate ID and Name:

DB029434

Enter Corporate ID

MINKOTA FISHERIES, 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).

22241 LAKE WAGGONER RD	PHILIP	SD	57567
Actual Street Address or Rural Route Box Number	City	State	ZIP+4
PO BOX 757	PHILIP	SD	57567-0310
Mailing Address, if Different from Street Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: RICHARD FAGEN

22241 LAKE WAGGONER RD	PHILIP	SD	57567
Actual Street Address or Rural Route Box Number in This State	City	State	ZIP+4
PO BOX 310	PHILIP	SD	57567-0310
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

5. The names and business addresses of its principal officers and directors (governors). If, pursuant to SDCL 47-1A-732(1), the board of directors has been eliminated, list the names of the shareholders.

<input checked="" type="checkbox"/>	RICHARD FAGEN	13052 50TH AVE SE	GRANITE FALLS	MN	56341
	President	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	ELAINE FAGEN	13052 50TH AVE SE	GRANITE FALLS	MN	56341
	Vice President	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	JULIE A SEAGER	307 ASH ST	PHILIP	SD	57567
	Secretary	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	PATRICK H SEAGER	307 ASH ST	PHILIP	SD	57567
	Treasurer	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>					
	Director	Actual Street Address	City	State	ZIP+4



Director

Actual Street Address

City

State

ZIP+4

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

Dated

Signature Accepted Electronically

(Signature of an Authorized Person)

PATRICK H SEAGER

(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.

4/9/2016 9:59:45 AM