

K 99811291.48

# State of South Dakota

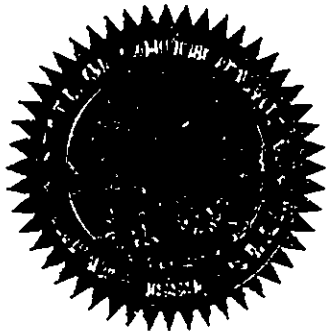


OFFICE OF THE SECRETARY OF STATE

## 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 RAMA MANAGEMENT, INC. duly signed and verified, pursuant to the provisions of the South Dakota Business Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I hereby issue this Certificate of Incorporation and attach hereto a duplicate of the Articles of Incorporation.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this October 28, 1998.

*Joyce Hazeltine*  
JOYCE HAZELTINE  
Secretary of State

6-11-98



021-0230

021-0230

- 4. To enter into and perform all manner and kinds of contracts, agreements, and obligations for any lawful purpose by or with any person, firm, association, corporation, or governmental division or subdivision.
- 5. To do all and everything necessary, suitable, or proper for the accomplishment of any of the purposes, the attainment of any of the objects, or the exercise of any of the powers herein set forth, either alone or in conjunction with other corporations, firms, or individuals, and either as principals or agents, and to do every other act or acts, thing or things, incidental or appurtenant to or growing out of or connected with the above-mentioned objects, purposes, or powers.
- 6. The foregoing clauses shall be construed as both purposes and powers, and it is hereby expressly provided that the foregoing enumerations of specific powers shall not be held to limit or restrict in any manner the powers of this corporation.

IV.

The total amount of authorized capital stock of this corporation is Fifty Thousand Dollars (\$50,000) divided into One Thousand (1,000) shares of Fifty Dollars (\$50) par value each, all of which shall be common stock. All common stock shall be voting stock, and all stock shall be fully paid and nonassessable.

V.

The post office address of the principal place of business of the corporation hereby formed is 5693 Magic Canyon Road, Rapid City, South Dakota 57702.

VI.

The address of the registered office of the corporation is 5693 Magic Canyon Road, *Rapid City* South Dakota 57702. The name of the registered agent at such address is James L. Scull, Jr.

VII.

The name and address of the incorporators of this corporation are as follows:

8012910048  
1/10/99

<u>Name</u>	<u>Address</u>
James L. Scull, Jr.	5693 Magic Canyon Road Rapid City, South Dakota 57702
Mary Baumgartner-Scull	5693 Magic Canyon Road Rapid City, South Dakota 57702

VIII.

The number of directors of this corporation shall be as provided for in the bylaws. The initial Board of Directors shall consist of two (2) directors whose names and addresses are as follows:

<u>Name</u>	<u>Address</u>
James L. Scull, Jr.	5693 Magic Canyon Road Rapid City, South Dakota 57702
Mary Baumgartner-Scull	5693 Magic Canyon Road Rapid City, South Dakota 57702

IX.

The corporation will not commence business until at least One Thousand Dollars (\$1,000) has been received by it as consideration for the issuance of shares, and in no event will business commence prior to January 1, 1999.

X.

No stockholder shall be liable for the debts of the corporation in any amount greater than his unpaid subscription.

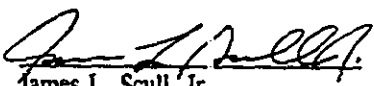
Effective  
date of filing  
10-28-98

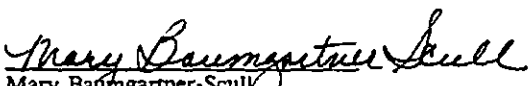
9814291.0048  
10/27/98

XI.

These articles may be amended in the manner authorized by law at the time of amendment.

Executed in duplicate the 27<sup>th</sup> day of October, 1998.


  
James L. Scull, Jr.

  
Mary Baumgartner-Scull

**CONSENT OF APPOINTMENT  
BY THE REGISTERED AGENT**

I, James L. Scull, Jr., hereby give my consent to serve as the registered agent for Rama Management, Inc.

Dated this 27<sup>th</sup> day of OCTOBER, 1998.

  
James L. Scull, Jr.

State of South Dakota     )  
  ) ss.  
County of Pennington     )

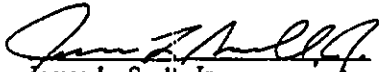
James L. Scull, Jr. and Mary Baumgartner-Scull, being first duly sworn on oath, deposes and says:

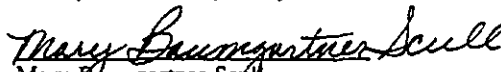
That they are the persons described in and who signed the foregoing Articles of Incorporation as incorporators therein; that they have read the articles and knows the contents thereof; that they intend in good faith to form a corporation for the purposes of the promotion of a lawful business as set forth in the articles and not for the purposes of enabling any corporation or corporations to avoid the provisions of the title "Corporations" of the South Dakota Compiled Laws of 1967 relating to unlawful trust and combinations and laws amendatory thereto.

81129

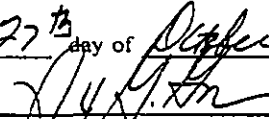
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1/10/99

In witness whereof, I have hereunto set my hand the day and year first above written.

  
James L. Scull, Jr.

  
Mary Baumgartner-Scull

Subscribed and sworn to before me the 27<sup>th</sup> day of October, 1998.

  
\_\_\_\_\_  
Notary Public, South Dakota

(SEAL)  
My Commission Expires: \_\_\_\_\_ Commission Expires  
20 July, 2004

0811291.0049  
1/10/99

RECEIPT NO. 745744

FILE NO. UB-040649

FEE RECEIVED: \$ 110

ART INC

OF

RAMA MANAGEMENT, INC.

1.000 AT \$50

Filed at the Request of:

PATRICK G GOETZINGER  
GUNDERSON PALMER GOODSSELL & ENLSON  
BOX 8045  
RAPID CITY SD 5709

State of South Dakota ss  
Office of the Secretary of State

Filed in the office of the Secretary of  
State on October 28, 1998

JOYCE HAZELTINE  
Secretary of State

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 10-27-99  
RECEIPT NO. 838539  
RECEIVED

OCT 27 1999

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address.

DB-040649 OCT/00  
RAMA MANAGEMENT, INC.  
SCULL, JAMES L. JR.  
5693 MAGIC CANYON ROAD  
RAPID CITY SD 57702-4721

Telephone # 605 343-2078  
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 To act as a general partner in a limited partnership.

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
<u>James L. Scull Jr</u>	President	<u>5683 Magic Canyon Road</u>	<u>Rapid City</u>	<u>SD</u>	<u>57702-4721</u>
<u>Mary Baumgartner-Scull</u>	Vice President	"	"	"	"
<u>Mary Baumgartner-Scull</u>	Secretary	"	"	"	"
<u>Mary Baumgartner-Scull</u>	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) 1000 CLASS Common SERIES A14 PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE \$50

5. NUMBER OF SHARES ACTUALLY ISSUED 20 CLASS Common SERIES A14

6. The amount of its stated capital is \$ 1000 (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 10-26-99 19 99

By Mary Baumgartner Scull  
(Signature)  
Its Secretary Vice Pres & Treas  
(Title)

STATE OF South Dakota  
COUNTY OF Pennington ss

I, Stacy W. Dades, a notary public, do hereby certify that on this 26<sup>th</sup> day of October 19 99, personally appeared before me Mary Baumgartner-Scull who, being by me first duly sworn, declared that he/she is the Sec/Vice Pres/Treas of Rama Management 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 6-12-2005

Stacy W. Dades  
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 \_\_\_\_\_ 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)



SECRETARY OF STATE  
STATE CAPITOL  
600 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)



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 \_\_\_\_\_  
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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)

2002

ANNUAL REPORT

0301218.1732  
1/30/03

FILE DATE 12-11-02  
RECEIPT NO. 11100310  
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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

1. Corporate Name, Registered Agent and Registered Address:

DB-040649 OCT/2001  
RAMA MANAGEMENT, INC.  
SCULL, JAMES L. JR.  
5693 MAGIC CANYON ROAD  
RAPID CITY SD 57702-4721

Telephone # 605-343-2500  
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 12-9-02  
By Mary Baumgartner Scull (Signature)  
Its Secretary Treasurer (Title)

STATE OF South Dakota ss  
COUNTY OF Harding

On this the 9th day of December 20 02, before me Harry W. Daw  
personally appeared Mary Baumgartner Scull, 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 12-12-05  
Notary Public Harry W. Daw

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) \_\_\_\_\_



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 \_\_\_\_\_  
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\_\_\_\_\_ 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)



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

File Date \_\_\_\_\_  
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\_\_\_\_\_ 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) \_\_\_\_\_

247 3760 04/25/2006

# 2005

# ANNUAL REPORT

DOMESTIC  
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 03/29/06  
RECEIPT NO. 1544214  
**RECEIVED**  
**RECEIVED**  
MAR 29 '06  
FEB 28 '06  
S.D. SEC. OF STATE  
S.D. SEC. OF STATE

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



\*DB040649\*  
DB040649 OCT/2004  
RAMA MANAGEMENT, INC.  
SCULL, JAMES L. JR.  
5693 MAGIC CANYON ROAD  
RAPID CITY SD 57702-4721

Telephone # 605-343-3842  
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 5693 Magic Canyon Road Rapid City SD 57702

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
<u>James R Scull Jr</u>	President	<u>5693 Magic Canyon Road</u>	<u>Rapid City</u>	<u>SD</u>	<u>57702</u>
<u>Mary A Scull</u>	Vice President				
<u>Mary A Scull</u>	Secretary	<u>5693 Magic Canyon Road</u>	<u>Rapid City</u>	<u>SD</u>	<u>57702</u>
	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:  
NUMBER OF AUTHORIZED SHARES 1000 CLASS \_\_\_\_\_ SERIES \_\_\_\_\_

6. NUMBER OF ISSUED AND OUTSTANDING SHARES 1000 CLASS Common Stock SERIES Common Stock

The statement may be signed by any authorized officer of the Corporation.  
Dated 10-28-05  
\_\_\_\_\_  
Signature Mary A Scull

Mary A Scull  
Printed Name

Secretary / V. President  
Title

-----

-----

100



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)

2007

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 05/07/08
RECEIPT NO. 1794708

RECEIVED
MAY 07 2008
S.D. SEC. OF STATE

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



DB040649 OCT/2006
RAMA MANAGEMENT, INC.
SCULL, JAMES L. JR.
5693 MAGIC CANYON ROAD
RAPID CITY SD 57702-4721

Telephone # 605-343-3842
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

Table with 6 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. Provide a brief description of the nature of the business

Table with 3 columns: NUMBER OF AUTHORIZED SHARES, CLASS, SERIES

Table with 3 columns: NUMBER OF ISSUED SHARES, CLASS, SERIES

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

Dated 2-10-08

Mary A Scull
Signature

MARY A SCULL
Printed Name

Secretary / V. President
Title

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.sdsos.gov

SOS CRP 07/05

276 2322

**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)

282 2474 11/18/2008

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	10-23-08
RECEIPT NO	1849721
<b>RECEIVED</b>	
<b>RECEIVED OCT 01 2008</b>	
<b>OCT 23 2008 S.D. SEC. OF STATE</b>	
<b>S.D. SEC. OF STATE</b>	

1. Corporate Name, Registered Agent Name and Address:



\*DB040649\*  
DB040649 OCT/2008  
RAMA MANAGEMENT, INC.  
SCULL, JAMES L. JR.  
5693 MAGIC CANYON ROAD  
RAPID CITY SD 57702-4721

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.

803 Industrial Ave Rapid City SD 57702  
Street Address City State ZIP+4

Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent

James L Scull Jr  
803 Industrial Ave Rapid City SD 57702  
Street Address (Required to be a South Dakota Address) City State ZIP+4

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

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

JAMES L. Scull, Jr 5693 MAGIC CANYON Rd Rapid City SD 57702-4721  
President Street Address City State ZIP+4

MARY BAUMGARTNER SCULL 5693 MAGIC CANYON Rd Rapid City SD 57702-4721  
Vice President Street Address City State ZIP+4

MARY BAUMGARTNER SCULL \_\_\_\_\_  
Secretary Street Address City State ZIP+4

MARY BAUMGARTNER SCULL \_\_\_\_\_  
Treasurer Street Address City State ZIP+4

\_\_\_\_\_  
Director Street Address City State ZIP+4

\_\_\_\_\_  
Director Street Address City State ZIP+4

Dated 9-27-08

Mary Baumgartner Scull  
(Signature of an authorized officer)

MARY BAUMGARTNER SCULL  
(Printed Name)

Vice President Sec/Treas  
(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 Rama Management Inc.

2. The name of the registered agent on file James L Scull Jr.

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

5693 Magic Canyon Rd Rapid City SD 57702  
Street Address (Required) City State ZIP+4

Mailing Address (Optional) City State ZIP+4


5. If the address has changed, its new address

803 Industrial Ave Rapid City SD 57702  
Street Address (Required to be a South Dakota Address) City State ZIP+4

PO Box 7591 Rapid City SD 57709  
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 9-27-08

  
(Signature of an authorized officer)

James L. Scull Jr  
(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 10/01/09
RECEIPT NO 1952584

RECEIVED

SEP 25 2009

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DB040649 OCT/2008
RAMA MANAGEMENT, INC.
SCULL, JAMES L. JR.
PO BOX 7591
RAPID CITY SD 57709-7591

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.

803 Industrial Ave Rapid City SD 57702
Street Address City State ZIP+4
PO Box 7591 Rapid City SD 57709
Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent

James L. Scull Jr.
803 Industrial Ave Rapid City SD 57702
Street Address (Required to be a South Dakota Address) City State ZIP+4
PO Box 7591 Rapid City SD 57709
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.

- James L. Scull Jr. 5693 Magic Canyon Rd Rapid City SD 57702
Mary Scull
Mary Scull
Mary Scull
Director
Director

Dated 9-23-09

James L. Scull Jr.
(Signature of an authorized officer)
James L. Scull Jr.
(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)

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 stamp with date 10/24/10, 2010 380, SEP 24 2010, S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DB040649 OCT/2009
RAMA MANAGEMENT, INC.
SCULL, JAMES L. JR.
PO BOX 7591
RAPID CITY SD 57709-7591

Telephone # 605-381-1172
FAX # 605-342-8568
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.

803 Industrial Ave Rapid City SD 57702
PO Box 7591 Rapid City SD 57709

4. The name of the South Dakota Registered Agent James L. Scull Jr.

803 Industrial Ave Rapid City SD 57702
PO Box 7591 Rapid City SD 57709

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.

- James L. Scull Jr. 5693 Magic Canyon Rapid City SD 57702
Mary Scull
Mary Scull
Mary Scull

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

Dated 10-21-10

Signature of James L. Scull Jr.
James L. Scull Jr.
(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)

2011

Enter Filing Year

# ANNUAL REPORT

FILE DATE 09/26/2011

RECEIPT NO 2694

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

## DOMESTIC

**FILING FEE: \$50.00** Please Type or Print Clearly In Ink  
Make check payable to SECRETARY OF STATE

1. Corporate ID and Name:  
DB040649  
RAMA MANAGEMENT, INC.  
803 INDUSTRIAL AVE  
RAPID CITY, SD57702-0337

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

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

803 INDUSTRIAL AVE	RAPID CITY	SD	57702-0337
Street Address	City	State	ZIP+4
PO BOX 7591	RAPID CITY	SD	57709-7591
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: JAMES L. JR. SCULL

803 INDUSTRIAL AVE	RAPID CITY	SD	57702-0337
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 7591	RAPID CITY	SD	57709-7591
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"/>	JAMES SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

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

Dated 09/26/2011

Signature Accepted Electronically  
(Signature of an Authorized Person)  
JAMES L SCULL, JR  
(Printed Name)

2012

Enter Filing Year

## ANNUAL REPORT

FILE 9/27/2012

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

## DOMESTIC

Please Type or Print Clearly In Ink

RECEIPT NO 65671

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

## 1. Corporate ID and Name:

DB040649  
RAMA MANAGEMENT, INC.  
803 INDUSTRIAL AVE  
RAPID CITY, SD 57702-0337

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

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

803 INDUSTRIAL AVE	RAPID CITY	SD	57702-0337
Street Address	City	State	ZIP+4
PO BOX 7591	RAPID CITY	SD	57709-7591
Mailing Address	City	State	ZIP+4

## 4. The name of the South Dakota Registered Agent

Agent Name: JAMES L. JR. SCULL

803 INDUSTRIAL AVE	RAPID CITY	SD	57702-0337
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 7591	RAPID CITY	SD	57709-7591
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"/>	JAMES L SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

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

Date 09/27/2012

Signature Accepted Electronically

(Signature of an Authorized Person)

JAMES L SCULL JR

(Printed Name)

2013

Enter Filing Year

## ANNUAL REPORT

FILE 8/2/2013

RECEIPT NO 132614

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

## DOMESTIC

Please Type or Print Clearly In Ink

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

1. Corporate ID and Name:  
DB040649  
RAMA MANAGEMENT, INC.  
803 INDUSTRIAL AVE  
RAPID CITY, SD 57702-0337

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

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

803 INDUSTRIAL AVE	RAPID CITY	SD	57702-0337
Street Address	City	State	ZIP+4
PO BOX 7591	RAPID CITY	SD	57709-7591
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: JAMES L. JR. SCULL

803 INDUSTRIAL AVE	RAPID CITY	SD	57702-0337
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 7591	RAPID CITY	SD	57709-7591
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"/>	JAMES L SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

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

Date 08/02/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

ANN CHYTKA

(Printed Name)

2014

Enter Filing Year

## ANNUAL REPORT

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

## DOMESTIC

Please Type or Print Clearly In Ink

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

FILE DATE 8/6/2014

RECEIPT NO 221919

## 1. Corporate ID and Name:

DB040649  
RAMA MANAGEMENT, INC.  
803 INDUSTRIAL AVE  
RAPID CITY, SD 57702-0337

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

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

803 INDUSTRIAL AVE	RAPID CITY	SD	57702-0337
Street Address	City	State	ZIP+4
PO BOX 7591	RAPID CITY	SD	57709-7591
Mailing Address	City	State	ZIP+4

## 4. The name of the South Dakota Registered Agent

Agent Name: JAMES L. JR. SCULL

803 INDUSTRIAL AVE	RAPID CITY	SD	57702-0337
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 7591	RAPID CITY	SD	57709-7591
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"/>	JAMES L SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

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

Dated 08/06/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

ANN CHYTKA

(Printed Name)

2015

ANNUAL REPORT

FILE DATE 8/3/2015

Enter Filing Year

DOMESTIC

RECEIPT NO 324388

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:

DB040649

RAMA MANAGEMENT, INC.

Telephone #

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

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

803 INDUSTRIAL AVE RAPID CITY SD 57702-0337

Actual Street Address or Rural Route Box Number City State ZIP+4

PO BOX 7591 RAPID CITY SD 57709-7591

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: JAMES L. JR. SCULL

803 INDUSTRIAL AVE RAPID CITY SD 57702-0337

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

PO BOX 7591 RAPID CITY SD 57709-7591

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

Email Address (Optional)

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.

[X] JAMES L SCULL 5693 MAGIC CANYON RD RAPID CITY SD 57702
President Actual Street Address City State ZIP+4

[ ] MARY A SCULL 5693 MAGIC CANYON RD RAPID CITY SD 57702
Vice President Actual Street Address City State ZIP+4

[ ] MARY A SCULL 5693 MAGIC CANYON RD RAPID CITY SD 57702
Secretary Actual Street Address City State ZIP+4

[ ] MARY A SCULL 5693 MAGIC CANYON RD RAPID CITY SD 57702
Treasurer Actual Street Address City State ZIP+4

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.

Dated

Email \_\_\_\_\_  
(Optional)

Signature Accepted Electronically \_\_\_\_\_

(Signature of an Authorized Person)

ANN CHYTKA \_\_\_\_\_

(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.

8/3/2015 9:33:10 AM

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

Please Type or Print Clearly In Ink

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

FILE DATE 8/4/2016

RECEIPT NO 442146

## 1. Corporate ID and Name:

DB040649

Enter Corporate ID

RAMA MANAGEMENT, 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).

803 INDUSTRIAL AVE	RAPID CITY	SD	57702-0337
Actual Street Address or Rural Route Box Number	City	State	ZIP+4
PO BOX 7591	RAPID CITY	SD	57709-7591
Mailing Address, if Different from Street Address	City	State	ZIP+4

## 4. The name of the South Dakota Registered Agent

Agent Name: JAMES L. JR. SCULL

803 INDUSTRIAL AVE	RAPID CITY	SD	57702-0337
Actual Street Address or Rural Route Box Number in This State	City	State	ZIP+4
PO BOX 7591	RAPID CITY	SD	57709-7591
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"/>	JAMES L SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	President	Actual Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Vice President	Actual Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	Secretary	Actual Street Address	City	State	ZIP+4
<input type="checkbox"/>	MARY A SCULL	5693 MAGIC CANYON RD	RAPID CITY	SD	57702
	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)

ANN CHYTKA

(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.

8/4/2016 8:27:31 AM