

Receipt Number: 1743490

File Number **DL015376**



ARTICLES_OF_ORGANIZATION

For

MARKET STREET RENTS, LLC

Filed at the request of:

MORGAN THEELER WHEELER COGLEY
RONALD WHEELER
PO BOX 1025
MITCHELL SD 57301

State of South Dakota
Office of the Secretary of State

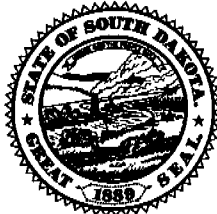
Filed in the office of the Secretary of State on: **Monday, December 24, 2007**



Secretary of State

Fee Received: \$125

State of South Dakota



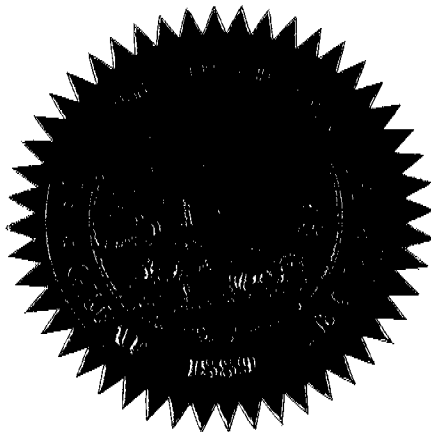
OFFICE OF THE SECRETARY OF STATE Certificate of Organization Limited Liability Company

ORGANIZATIONAL ID #: DL015376

I, **Chris Nelson**, Secretary of State of the State of South Dakota, hereby certify that the Articles of Organization of **MARKET STREET RENTS, LLC** duly signed and verified, pursuant to the provisions of the South Dakota Limited Liability Company Act, have been received in this office and are found to conform to law.

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

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this December 24, 2007.



Chris Nelson

Chris Nelson
Secretary of State

RECEIVED

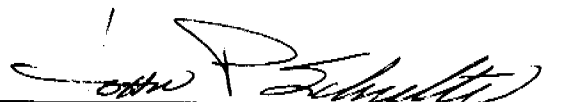
DEC 24 2007

S.D. SEC. OF STATE

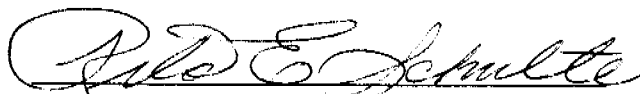
Filed this 24th day of
Dec. 2007ARTICLES OF ORGANIZATION
OF A
DOMESTIC LIMITED LIABILITY COMPANY

1. The name of the Limited Liability Company is Market Street Rents, LLC.
2. The duration of the company is perpetual.
3. The address of the initial designated office is PO Box 926, 1624 Bowe Ct., Huron, SD 57350.
4. The name and street address of the initial agent for services of process is John Schulte, PO Box 926, 1624 Bowe Ct., Huron, SD 57350.
5. Then names and street address of each organizer:

John P. Schulte PO Box 926 1624 Bowe Ct. Huron, SD 57350	Rita E. Schulte PO Box 926 1624 Bowe Ct. Huron, SD 57350
---	---
6. The company is to be a member managed company.
7. No member shall be liable for the debts and obligations of the company under SDCL §47-34A-303 (c).

Dated this 19th day of December, 2007.

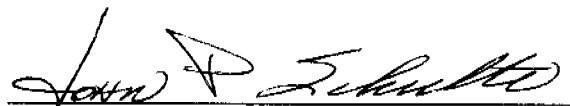
John P. Schulte, Member



Rita E. Schulte, Member

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, John P. Schulte, hereby give my consent to serve as the registered agent for Market Street Rents, LLC.

Dated this 19th day of December, 2007.

John P. Schulte

d/1013376

2008

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

ANNUAL REPORT DOMESTIC L.L.C.

Please Type or Print Clearly in Ink

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

RECEIVED

DEC 08 2008

S.D. SEC. OF STATE

FILE DATE

12/08/08

RECEIPT NO.

RECEIVED

NOV 06 2008

S.D. SEC. OF STATE

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



DL015376 DEC/0000
MARKET STREET RENTS, LLC
SCHULTE, JOHN
1624 BOWE CT
PO BOX 926
HURON SD 57350-0926

Telephone # _____

FAX # _____

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

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

1624 Bowe Ct Huron SD 57350
Street Address City State ZIP+4

Mailing Address (Optional)

City

State

ZIP+4

3. The name of the South Dakota Registered Agent

John P Schulte
1624 Bowe Ct. Huron SD 57350
Street Address (Required to be a South Dakota Address) City State ZIP+4

PO Box 926 Huron SD 57350
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

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

John P Schulte	1624 Bowe Ct.	Huron	SD	57350
Manager	Street Address	City	State	ZIP+4
Rita E Schulte	1624 Bowe Ct.	Huron	SD	57350
Manager	Street Address	City	State	ZIP+4
Manager	Street Address	City	State	ZIP+4

Dated 11-4-08

John P Schulte
(Signature of an Authorized Manager or Member)

John P Schulte
(Printed Name)

Member
(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
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5. If the address has changed, its new address

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

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

Dated _____

(Signature of an authorized officer)

(Printed Name)

(Title)

2009

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

ANNUAL REPORT DOMESTIC L.L.C.

Please Type or Print Clearly in Ink

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

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



DL015376 DEC/2008
MARKET STREET RENTS, LLC
SCHULTE, JOHN
PO BOX 926
HURON SD 57350-0926

FILE DATE 12/17/09
RECEIPT NO 1981475

RECEIVED

DEC 17 2009

S.D. SEC. OF STATE

Telephone 605-354-8265
FAX # none

FILING DATE: Due during the month the Certificate of Organization 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.

1624 Bowe Ct. Huron SD 57350
Street Address City State ZIP+4
PO Box 926 Huron SD 57350-0926
Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent

John P Schulte
1624 Bowe Ct Huron SD 57350
Street Address (Required to be a South Dakota Address) City State ZIP+4
PO Box 926 Huron SD 57350-0926
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

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

John P Schulte 1624 Bowe Ct Huron SD 57350
Manager Street Address City State ZIP+4

Manager Street Address City State ZIP+4

Manager Street Address City State ZIP+4

Dated 12-15-09

John P Schulte
(Signature of an Authorized Manager or Member)

John P Schulte
(Printed Name)

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

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

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)

314 1386 12/28/2010

2010

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

ANNUAL REPORT
DOMESTIC L.L.C.

Please Type or Print Clearly in Ink

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

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



DL015376 DEC/2009
MARKET STREET RENTS, LLC
SCHULTE, JOHN
PO BOX 926
HURON SD 57350-0926

FILE DATE

12/14/10

RECEIPT NO

2095863

RECEIVED RECEIVED

DEC 08 2010 DEC 14 2010

S.D. SEC. OF STATE

S.D. SEC. OF STATE

Telephone #

605 354 8265

FAX #

none

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

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

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

429 Market St. W Huron SD 57350
Street Address City State ZIP+4
PO Box 926 Huron SD 57350
Mailing Address (Optional) City State ZIP+4

4. The name of the South Dakota Registered Agent:

John P Schulte
1624 Bowe Court Huron SD 57350
Street Address (Required to be a South Dakota Address) City State ZIP+4
PO Box 926 Huron SD 57350
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

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

John P Schulte 1624 Bowe Ct Huron SD 57350
Manager Street Address City State ZIP+4

Manager Street Address City State ZIP+4

Manager Street Address City State ZIP+4

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

Dated 12-6-10

John P Schulte
(Signature of an Authorized Person)

John P Schulte
(Printed Name)

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

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

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

1. The name of the entity _____

2. The name of the registered agent on file _____

The name of the successor registered agent _____

3. If listing a Commercial Registered Agent, please state their identification number _____

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

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

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

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

Dated _____

(Signature of an Authorized Person)

(Printed Name)

2011

Enter Filing Year

ANNUAL REPORT

FILE DATE 12/05/2011

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

DOMESTIC LLC

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

RECEIPT NO 9888

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

DL015376
MARKET STREET RENTS, LLC
429 MARKET ST W
HURON, SD57350-1543

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

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

429 MARKET ST W	HURON	SD	57350-1543
Street Address	City	State	ZIP+4
1624 BOWE COURT	HURON	SD	57350-3843
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: JOHN SCHULTE

1624 BOWE CT	HURON	SD	57350-3843
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 926	HURON	SD	57350-0926
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

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Manager	Street Address	City	State	ZIP+4
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☐

Manager	Street Address	City	State	ZIP+4
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☐

Manager	Street Address	City	State	ZIP+4
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No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Dated 12/05/2011

Signature Accepted Electronically
(Signature of an Authorized Person)

JOHN P SCHULTE
(Printed Name)

12/5/2011 4:17:22PM

2012

Enter Filing Year

ANNUAL REPORT

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

DOMESTIC LLC

Please Type or Print Clearly In Ink

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

FILE 12/17/2012

RECEIPT NO 81760

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

DL015376
MARKET STREET RENTS, LLC
429 MARKET ST W
HURON, SD 57350-1543

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

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

429 MARKET ST W	HURON	SD	57350-1543
Street Address	City	State	ZIP+4
1624 BOWE COURT	HURON	SD	57350-3843
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: JOHN SCHULTE

1624 BOWE CT	HURON	SD	57350-3843
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 926	HURON	SD	57350-0926
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

☐

Manager	Street Address	City	State	ZIP+4
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☐

Manager	Street Address	City	State	ZIP+4
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☐

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

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

Date 12/17/2012

Signature Accepted Electronically

(Signature of an Authorized Person)

JOHN P. SCHULTE

(Printed Name)

2013

Enter Filing Year

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

DOMESTIC LLC

Please Type or Print Clearly In Ink

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

FILE 12/2/2013

RECEIPT NO 156002

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

DL015376
MARKET STREET RENTS, LLC
429 MARKET ST W
HURON, SD 57350-1543

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

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

Agent Name: JOHN SCHULTE

1624 BOWE CT	HURON	SD	57350-3843
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 926	HURON	SD	57350-0926
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

New Agent Name: JOHN P. SCHULTE

1624 BOWE COURT	HURON	SD	57350-3843
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
		SD	
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

Date 12/02/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

JOHN P. SCHULTE

(Printed Name)

2013

Enter Filing Year

ANNUAL REPORT

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

DOMESTIC LLC

Please Type or Print Clearly In Ink

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

FILE 12/2/2013

RECEIPT NO 156002

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

DL015376
MARKET STREET RENTS, LLC
429 MARKET ST W
HURON, SD 57350-1543

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

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

429 MARKET ST W	HURON	SD	57350-1543
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
-----------------	------	-------	-------

4. The name of the South Dakota Registered Agent

Agent Name: JOHN P. SCHULTE

1624 BOWE COURT	HURON	SD	57350-3843
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4

Mailing Address in This State, if Different from Street Address	City	State	ZIP+4
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5. The names and business addresses of its managers. If the L.L.C. is member-managed, the names and addresses of the members need not be set forth.

☐

Manager	Street Address	City	State	ZIP+4
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☐

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

☐

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

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

Date 12/02/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

JOHN P. SCHULTE

(Printed Name)

2014

Enter Filing Year

ANNUAL REPORT

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

DOMESTIC LLC

Please Type or Print Clearly In Ink

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

FILE DATE 12/22/2014

RECEIPT NO 256413

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

DL015376
MARKET STREET RENTS, LLC
1624 BOWE COURT
HURON, SD 57350-384

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

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

1624 BOWE COURT HURON SD 57350-384

Street Address City State ZIP+4

Mailing Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: JOHN P. SCHULTE

1624 BOWE COURT HURON SD 57350-3843

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

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

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

☐

Manager Street Address City State ZIP+4

☐

Manager Street Address City State ZIP+4

☐

Manager Street Address City State ZIP+4

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

Dated 12/22/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

JOHN P SCHULTE

(Printed Name)

2015

Enter Filing Year

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

ANNUAL REPORT

DOMESTIC LLC

SDCL 47-34A-211

Please Type or Print Clearly In Ink

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

FILE DATE 12/7/2015

RECEIPT NO 356949

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

DL015376

MARKET STREET RENTS, LLC

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

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

1624 BOWE COURT HURON SD 57350-384

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

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

4. The name of the South Dakota Registered Agent

Agent Name: JOHN P. SCHULTE

1624 BOWE COURT HURON SD 57350-3843

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

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

5. The names and addresses of its managers (governors). If the LLC is member-managed, the names and addresses of the members (governors) need not be set forth.

☐

Manager Actual Street Address City State ZIP+4

☐

Manager Actual Street Address City State ZIP+4

☐

Manager Actual Street Address City State ZIP+4

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

Dated 12/07/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

JOHN P SCHULTE

(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.

12/7/2015 12:22:40 PM