

| 1.) CORPORATION NAME: Terex Utilities, Inc. | DUE DATE: 2/29/2016 | | | | | | |
|---|--|-------|------------|------|-----|------|---------|
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street | SCC ID NO: F1699042 | | | | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY | 5.) STOCK INFORMATION | | | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: OR | <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;">CLASS</th> <th style="width:50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMA</td> <td>600</td> </tr> <tr> <td>COMB</td> <td>150,000</td> </tr> </tbody> </table> | CLASS | AUTHORIZED | COMA | 600 | COMB | 150,000 |
| CLASS | AUTHORIZED | | | | | | |
| COMA | 600 | | | | | | |
| COMB | 150,000 | | | | | | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 12805 SW 77TH STREET

CITY/ST/ZIP: TIGARD, OR 97223

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

| | | | | |
|------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: ERIC I COHEN | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: PRES/SECRETARY | | | | |
| ADDRESS: 200 NYALA FARM ROAD | | | | |
| CITY/ST/ZIP/CO: WESTPORT, CT 06880 | | | | |

| | | | | |
|-------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: DONALD ANDERSON | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: VICE PRESIDENT | | | | |
| ADDRESS: 500 OAKWOOD ROAD | | | | |
| CITY/ST/ZIP/CO: WATERTOWN, SD 57201 | | | | |

| | | | | |
|------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: KEVIN BRADLEY | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: VP/DIR | | | | |
| ADDRESS: 200 NYALA FARM RD | | | | |
| CITY/ST/ZIP/CO: WESTPORT, CT 06880 | | | | |

| | | | | |
|------------------------------------|-------------------------------------|---------|--------------------------|----------|
| NAME: RAMON OLIU | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
| TITLE: VICE PRESIDENT | | | | |
| ADDRESS: 200 NYALA FARM RD | | | | |
| CITY/ST/ZIP/CO: WESTPORT, CT 06880 | | | | |

| | | | | |
|------------------------------------|-------------------------------------|---------|--------------------------|----------|
| NAME: ROBERT WYLIE | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
| TITLE: VP TGAX | | | | |
| ADDRESS: 200 NYALA FARM RD | | | | |
| CITY/ST/ZIP/CO: WESTPORT, CT 06880 | | | | |

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

| | | |
|---|----------------------------------|-----------|
| /s/ ROBERT WYLIE | ROBERT WYLIE, VP TGAX | 1/15/2016 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.