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Statement Appointing an Agent

filed pursuant to §7-90-301, et seq. and §7-30-110 of the Colorado Revised Statutes (C.R.S.)

1. True name of the nonprofit association: _____

2. Principal office street address: _____
(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code)

(Province – if applicable) (Country – if not US)

3. Principal office mailing address:
(if different) _____
(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code)

(Province – if applicable) (Country – if not US)

3. Registered agent: (if an individual): _____
(Last) (First) (Middle) (Suffix)

OR (if a business organization): _____

4. The person appointed as registered agent in the document has consented to being so appointed.

5. Registered agent street address: _____
(Street name and number)

(City) CO (State) (Postal/Zip Code)

6. Registered agent mailing address:
(if different from above) _____
(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code)

(Province – if applicable) (Country – if not US)

7. (Optional) Delayed effective date: _____
(mm/dd/yyyy)

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_____	_____	_____	_____
<i>(Last)</i>	<i>(First)</i>	<i>(Middle)</i>	<i>(Suffix)</i>

<i>(Street name and number or Post Office Box information)</i>			

_____	_____	_____	
<i>(City)</i>	<i>(State)</i>	<i>(Postal/Zip Code)</i>	
_____		_____	
<i>(Province – if applicable)</i>		<i>(Country – if not US)</i>	

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Denver, CO 80290

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