```html
<!DOCTYPE HTML PUBLIC "-//W3C//DTD HTML 4.01 Transitional//EN">


<html>
<HEAD>
    <META http-equiv="X-UA-Compatible" content="IE=EmulateIE8" >


<base href="https://www.sos.state.co.us/biz/mainLayout.jsp">


    <TITLE>


        Colorado Secretary of State -
        Articles of Incorporation (Nonprofit Corporation)

    </TITLE>

<LINK rel="stylesheet" href="style.css" type="text/css">
</HEAD>

<body>
<FORM NAME="logoutForm" METHOD="POST" ACTION="Logout.do"
style="margin: 0; padding: 0;">
   <INPUT TYPE="HIDDEN" NAME="logoutExitPage" value="/Welcome.do">
</FORM>

<!-- this is banner 2 revised -->
<style type="text/css">
#pageHeader {
    width: expression( document.body.clientWidth < 1000 ? "1000px" :
"auto" ); /* sets max-width for IE */
}

@media print {
                #printHeader {
                                width: 1000px;
                }
}

body {
    margin: 0px;
    min-width: 1000px;


}
.toplinks {
    color: #FFFFFF;
}

.toplinks a {
    text-decoration: none;
    font-family: verdana, Arial, Helvetica, sans-serif;
    font-size: 12px;
    line-height: 18px;
    color: #FFFFFF;
    text-decoration: none;
```

```
        }

        .toplinks a:hover {
            text-decoration: underline;
        }

        .pageBand {
            background-color: #333333;
            text-align: center;

        }


--></style>
<div id="printHeader">
<div id="pageHeader" style="position: relative;">
<div style="background-color: #5087c9; height: 140px;">
<div style="float: left;"><a href="https://www.sos.state.co.us/">
<img alt="Colorado Secretary of State, Jena Griswold text with
Colorado State Seal" src="https://www.sos.state.co.us/pubs/images
/Banner/bannerLeft.png" style="text-decoration: none; border: 0
none; border-width: 0px;" width="332" height="140" /> </a></div>
<div style="float: right;"><img alt="Image of Jena Griswold and
Colorado mountains" src="https://www.sos.state.co.us/pubs/images
/Banner/bannerRightShort.png" />
<div class="toplinks" style="position: absolute; top: 1px; right:
5px;"><a href="https://www.sos.state.co.us/pubs/info_center
/biography.html">About Secretary Griswold</a>  |  <a
href="https://www.sos.state.co.us/pubs/spanish
/spanishHome.html">Espa&#241;ol</a> </div>

</div>
</div>
</div>
</div>

<div id="application" style="position: absolute; top: 165px; width:
100%">

<table width="100%" border="0" cellspacing="0" cellpadding="0">
    <tr>
        <td width="10%" valign="top" bgcolor="#E8E8E8">
            <div id="leftnav">
                <!--- leftNav.jsp --->


<!--- This table holds the sidebar navigation elements,
                We use clrdots and a background color of #FFFFFF to
achive the box around the links.
                We also use the clrdot as a spacer between groups of
menu items.  Typically 23px.

                A selected state is archived by changing the style
class on the href to "wt" then in the
                table cell use the background image menu_arrow.gif.
See example below (Menu Item 2).--->

        <table align="left" width="138" border="0" cellspacing="0"
cellpadding="0" >
```

```html
        <tr>
            <td width="137"> </td>
        </tr>

            <tr>

                <td width="137" align="left" ><a
href="https://www.sos.state.co.us/pubs/business/main.html"
class="leftnav">
            Business Home</a>

                </td>
            </tr>

            <tr>

                <td width="137" align="left" ><a
href="BusinessFunctions.do?org.apache.struts.taglib.html.TOKEN=94d40
e87385be748f596e3c7142f5864" class="leftnav">Business
Information</a>

                </td>
            </tr>

            <tr>

                <td width="137" align="left" ><a
href="BusinessEntityCriteriaExt.do?resetTransTyp=Y&amp;
org.apache.struts.taglib.html.TOKEN=94d40e87385be748f596e3c7142f5864
" class="leftnav">Business Search</a>

                </td>
            </tr>

    <tr><td><br></td></tr>

        <tr>
            <td width="137"> </td>
        </tr>

            <tr>

                <td width="137" align="left" ><a
href="https://www.sos.state.co.us/pubs/business/helpFiles
/ARTINC_NPC_HELP.html"  target="_blank" class="leftnav" >
            Help on this Page</a>

                </td>
            </tr>

            <tr>

                <td width="137" align="left" ><a href="
https://www.sos.state.co.us/pubs/business/faq_information.html"
target="_blank" class="leftnav" >
            FAQs, Glossary and Information</a>

                </td>
            </tr>
```

```
    <tr><td><br></td></tr>

        </table>

            </div>
        </td>
        <td>
            <table border="0" cellspacing="5" cellpadding="5" >
                <tr>
                    <td>
                        <DIV class="page_hdg" id="pageSubtitle">
                            <BR>
                                <center> <font
class=".page_hdg">Articles of Incorporation (Nonprofit Corporation)
</font> </center>
                        </DIV>
                        <BR>
                        <DIV class="page_description"
id="pageDescription">

                        </DIV>
                    </td>
                </tr>
                <tr>
                    <td>
                        <DIV class="page_messages"
id="pageMessages">

                        </DIV>
                    </td>
                </tr>
                <tr>
                    <td>
                        <form name="CFDTransactionForm"
method="post" action="/biz/NPTransaction.do"><div><input
type="hidden" name="org.apache.struts.taglib.html.TOKEN"
value="94d40e87385be748f596e3c7142f5864"></div>

<Table>
    <TR><TD colspan="2">
                    <TR>
                        <TD colspan="2">

<Table border="0">

        <tr>

            <td align="left" valign="top">


<Table>

                            <TR>
                                <TD colspan="2">
```

```html
                        </TD>
                    </TR>

</Table>


        </td>

    </tr>

    <tr>

        <td align="left" valign="top">

<Table>

                    <TR>
                        <TD colspan="2">
```

 `<i>501(c)(3) Notice:

To obtain federal tax-exempt status as a charitable organization, the articles of incorporation must contain a required purpose clause and a distribution of assets provision. For more information on 501(c)(3) qualification, visit the IRS Web site, www.irs.gov. Select the "Charities & Non-profits" link and then the "Life Cycle" link.</i>`

```html
                        </TD>
                    </TR>

</Table>
```

```html
            </td>

        </tr>

</Table>


                    </TD>
                </TR>

</TD></TR><TR><TD colspan="2"><BR></TD></TR><TR><TD colspan="2">
                    <TR>
                        <TD colspan="2">

<Table border="0">

        <tr>

            <td align="left" valign="top">


<Table>

                            <TR>
                                <TD align="left" >

                                                <font size="-1"
face="Arial, Helvetica, sans-serif">Fee:</font>

                                </TD>
                                <TD>
                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">
```

    $50.00

        `<input type="hidden" name="bizFilingPrice" value="$50.00">`

```html
                                    </font>

                                </TD>
                            </TR>
```

```
          </Table>


                    </td>

            </tr>

            <tr>

                <td align="left" valign="top">


<Table>

                            <TR>
                                <TD colspan="2">








 <font class="txn_statutes">Statutory references:   <a
href="https://www.sos.state.co.us/pubs/business/statute_help.html"
class="TxnStatutes" target="_blank">7-122-101</a> and <a
href="https://www.sos.state.co.us/pubs/business/statute_help.html"
class="TxnStatutes" target="_blank">7-122-102</a>, C.R.S.</font>
<br><br>


                                </TD>
                            </TR>


</Table>


                    </td>

            </tr>

            <tr>

                <td align="left" valign="top">


<Table>

                            <TR>
                                <TD colspan="2">
```

Your document will be available to the public.

```
                              </TD>
                    </TR>
            <TR><TD colspan="2"><BR></TD></TR>
                    <TR>
                            <TD colspan="2">
```

* Required field.

```
                              </TD>
                    </TR>
```

</Table>

```
            </td>
        </tr>
</Table>
```

```
                    </TD>
                </TR>
```

```
</TD></TR><TR><TD colspan="2">
                    <TR>
                        <TD colspan="2">
```

<Table border="0">

```
        <tr>
```

```html
            <td align="left" valign="top">


<Table>

                                <TR>
                                    <TD align="left" >

                                                    <font size="-1"
face="Arial, Helvetica, sans-serif"><strong>Entity name</strong>:
</font>

                                    </TD>
                                    <TD>
                                        <font class="staticTextValue"
face="Times New Roman, Times, serif">
```

    Universe Reserve Treasury

```html
        <input type="hidden" name="name" value="Universe Reserve
Treasury">

                                        </font>

                                    </TD>
                                </TR>

</Table>


            </td>

        </tr>

</Table>


                        </TD>
                    </TR>

</TD></TR><TR><TD colspan="2"><HR></TD></TR><TR><TD colspan="2">
<HR></TD></TR>
```

```
<TR>
    <TD colspan="2">




 <span class="pagehead5">Principal office address</span>


                                    </TD>
                                </TR>
                            <TR><TD colspan="2">
                        <TR>
                            <TD colspan="2">

<Table border="0">

        <tr>

            <td align="left" valign="top">


<Table>

                            <TR>
                                <TD colspan="2">









 <font class="group_title">Street Address</font>


                                    </TD>
                                </TR>


</Table>


            </td>

        </tr>
```

```html
        <tr>

            <td align="left" valign="top">


<Table>

                                <TR>
                                    <TD colspan="2">










                                    </TD>
                                </TR>


</Table>



            </td>

        </tr>

        <tr>

            <td align="left" valign="top">


<Table>

                                <TR>
                                    <TD align="left" >

                                                    <font size="-1"
face="Arial, Helvetica, sans-serif">Address 1:</font>

                                    </TD>
                                    <TD>
                                        <font class="staticTextValue"
face="Times New Roman, Times, serif">
```

```html
        <input type="text" name="principalStreet1" maxlength="35"
size="20" value="5120 N. Broadway Apt302">


                                        </font>
                                <span class='redText'>*</span>
                                </TD>
                            </TR>

                            <TR>
                                <TD align="left" >

                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">Address 2:</font>

                                </TD>
                                <TD>
                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="principalStreet2" maxlength="35"
size="20" value="0000">


                                        </font>

                                </TD>
                            </TR>

                            <TR>
                                <TD align="left" >

                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">City:</font>

                                </TD>
                                <TD>
                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="principalCity" maxlength="35"
size="20" value="Denver">
```

```html
                                                        </font>
                                                    <span class='redText'>*</span>
                                                    </TD>
                                            </TR>

                                            <TR>
                                                <TD align="left" >

                                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">State:</font>

                                                </TD>
                                                <TD>
                                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">
                                                    <select name="principalState"
size="1"><option value=""></option>

                        <option value="OT">Outside US/Canada</option>
<option value="AL">Alabama</option>
<option value="AK">Alaska</option>
<option value="AS">American Samoa</option>
<option value="AZ">Arizona</option>
<option value="AR">Arkansas</option>
<option value="CA">California</option>
<option value="CO" selected="selected">Colorado</option>
<option value="MP">Commonwealth of the Northern Mariana
Islands</option>
<option value="CT">Connecticut</option>
<option value="DE">Delaware</option>
<option value="DC">District Of Columbia</option>
<option value="FM">Federated States of Micronesia</option>
<option value="FL">Florida</option>
<option value="GA">Georgia</option>
<option value="GU">Guam</option>
<option value="HI">Hawaii</option>
<option value="ID">Idaho</option>
<option value="IL">Illinois</option>
<option value="IN">Indiana</option>
<option value="IA">Iowa</option>
<option value="KS">Kansas</option>
<option value="KY">Kentucky</option>
<option value="LA">Louisiana</option>
<option value="ME">Maine</option>
<option value="MH">Marshall Islands</option>
<option value="MD">Maryland</option>
<option value="MA">Massachusetts</option>
<option value="MI">Michigan</option>
<option value="MN">Minnesota</option>
<option value="MS">Mississippi</option>
<option value="MO">Missouri</option>
<option value="MT">Montana</option>
<option value="NE">Nebraska</option>
<option value="NV">Nevada</option>
<option value="NH">New Hampshire</option>
<option value="NJ">New Jersey</option>
<option value="NM">New Mexico</option>
<option value="NY">New York</option>
<option value="NC">North Carolina</option>
<option value="ND">North Dakota</option>
```

```html
<option value="OH">Ohio</option>
<option value="OK">Oklahoma</option>
<option value="OR">Oregon</option>
<option value="PW">Palau</option>
<option value="PA">Pennsylvania</option>
<option value="PR">Puerto Rico</option>
<option value="RI">Rhode Island</option>
<option value="SC">South Carolina</option>
<option value="SD">South Dakota</option>
<option value="TN">Tennessee</option>
<option value="TX">Texas</option>
<option value="VI">US Virgin Islands</option>
<option value="UT">Utah</option>
<option value="VT">Vermont</option>
<option value="VA">Virginia</option>
<option value="WA">Washington</option>
<option value="WV">West Virginia</option>
<option value="WI">Wisconsin</option>
<option value="WY">Wyoming</option>
<option value="AB">Alberta</option>
<option value="BC">British Columbia</option>
<option value="MB">Manitoba</option>
<option value="NB">New Brunswick</option>
<option value="NL">Newfoundland and Labrador</option>
<option value="NT">Northwest Territories</option>
<option value="NS">Nova Scotia</option>
<option value="NU">Nunavut</option>
<option value="ON">Ontario</option>
<option value="PE">Prince Edward Island</option>
<option value="QC">Quebec</option>
<option value="SK">Saskatchewan</option>
<option value="YT">Yukon</option>
<option value="AA">AA</option>
<option value="AE">AE</option>
<option value="AP">AP</option></select>


                                  </font>
                              <span class='redText'>*</span>
                              </TD>
                          </TR>

                          <TR>
                              <TD align="left" >

                                              <font size="-1"
face="Arial, Helvetica, sans-serif">Zip/Postal Code:</font>

                              </TD>
                              <TD>
                                  <font class="staticTextValue"
face="Times New Roman, Times, serif">
```

```html
          <input type="text" name="principalZip" maxlength="10"
size="10" value="80216">

                              </font>
                          <span class='redText'>*</span>
                          </TD>
                      </TR>

                      <TR>
                          <TD align="left" >

                                        <font size="-1"
face="Arial, Helvetica, sans-serif">Province:</font>

                          </TD>
                          <TD>
                              <font class="staticTextValue"
face="Times New Roman, Times, serif">

          <input type="text" name="principalProvince" maxlength="35"
size="20" value="Federal Reserve District 10">

                              </font>

                          </TD>
                      </TR>

                      <TR>
                          <TD align="left" >

                                        <font size="-1"
face="Arial, Helvetica, sans-serif">Country:</font>

                          </TD>
                          <TD>
                              <font class="staticTextValue"
face="Times New Roman, Times, serif">
                              <select name="principalCountry"
size="1"><option value=""></option>

                      <option value="US" selected="selected">United
States</option>
<option value="AF">Afghanistan</option>
<option value="AL">Albania</option>
<option value="DZ">Algeria</option>
<option value="AS">American Samoa</option>
<option value="AD">Andorra</option>
<option value="AO">Angola</option>
<option value="AI">Anguilla</option>
<option value="AQ">Antarctica</option>
<option value="AG">Antigua and Barbuda</option>
```

```html
<option value="AR">Argentina</option>
<option value="AM">Armenia</option>
<option value="AW">Aruba</option>
<option value="AU">Australia</option>
<option value="AT">Austria</option>
<option value="AZ">Azerbaijan</option>
<option value="BS">Bahamas</option>
<option value="BH">Bahrain</option>
<option value="BD">Bangladesh</option>
<option value="BB">Barbados</option>
<option value="BY">Belarus</option>
<option value="BE">Belgium</option>
<option value="BZ">Belize</option>
<option value="BJ">Benin</option>
<option value="BM">Bermuda</option>
<option value="BT">Bhutan</option>
<option value="BO">Bolivia</option>
<option value="BA">Bosnia and Herzegovina</option>
<option value="BW">Botswana</option>
<option value="BV">Bouvet Island</option>
<option value="BR">Brazil</option>
<option value="IO">British Indian Ocean Terr</option>
<option value="BN">Brunei Darussalam</option>
<option value="BG">Bulgaria</option>
<option value="BF">Burkina Faso</option>
<option value="BI">Burundi</option>
<option value="KH">Cambodia</option>
<option value="CM">Cameroon</option>
<option value="CA">Canada</option>
<option value="CV">Cape Verde</option>
<option value="KY">Cayman Islands</option>
<option value="CF">Central African Republic</option>
<option value="TD">Chad</option>
<option value="CHI">Channel Islands</option>
<option value="CL">Chile</option>
<option value="CN">China</option>
<option value="CX">Christmas Island</option>
<option value="CC">Cocos (Keeling) Islands</option>
<option value="CO">Colombia</option>
<option value="KM">Comoros</option>
<option value="CG">Congo</option>
<option value="CD">Congo, Democratic Republic of</option>
<option value="CK">Cook Islands</option>
<option value="CR">Costa Rica</option>
<option value="CI">Cote D&#39;Ivoire</option>
<option value="HR">Croatia</option>
<option value="CU">Cuba</option>
<option value="CY">Cyprus</option>
<option value="CZ">Czech Republic</option>
<option value="DK">Denmark</option>
<option value="DJ">Djibouti</option>
<option value="DM">Dominica</option>
<option value="DO">Dominican Republic</option>
<option value="EC">Ecuador</option>
<option value="EG">Egypt</option>
<option value="SV">El Salvador</option>
<option value="GQ">Equatorial Guinea</option>
<option value="ER">Eritrea</option>
<option value="EE">Estonia</option>
<option value="ET">Ethiopia</option>
```

```html
<option value="FK">Falkland Islands (Malvinas)</option>
<option value="FO">Faroe Islands</option>
<option value="FJ">Fiji</option>
<option value="FI">Finland</option>
<option value="FR">France</option>
<option value="GF">French Guiana</option>
<option value="PF">French Polynesia</option>
<option value="TF">French Southern Territories</option>
<option value="GA">Gabon</option>
<option value="GM">Gambia</option>
<option value="GE">Georgia</option>
<option value="DE">Germany</option>
<option value="GH">Ghana</option>
<option value="GI">Gibraltar</option>
<option value="GR">Greece</option>
<option value="GL">Greenland</option>
<option value="GD">Grenada</option>
<option value="GP">Guadeloupe</option>
<option value="GU">Guam</option>
<option value="GT">Guatemala</option>
<option value="GN">Guinea</option>
<option value="GW">Guinea-Bissau</option>
<option value="GY">Guyana</option>
<option value="HT">Haiti</option>
<option value="HM">Heard Island &amp; Mcdonald Islands</option>
<option value="VA">Holy See (Vatican City St)</option>
<option value="HN">Honduras</option>
<option value="HK">Hong Kong</option>
<option value="HU">Hungary</option>
<option value="IS">Iceland</option>
<option value="IN">India</option>
<option value="ID">Indonesia</option>
<option value="IR">Iran, Islamic Republic Of</option>
<option value="IQ">Iraq</option>
<option value="IE">Ireland</option>
<option value="IL">Israel</option>
<option value="IT">Italy</option>
<option value="JM">Jamaica</option>
<option value="JP">Japan</option>
<option value="JO">Jordan</option>
<option value="KZ">Kazakhstan</option>
<option value="KE">Kenya</option>
<option value="KI">Kiribati</option>
<option value="KP">Korea, Democratic People&#39;s Rep</option>
<option value="KR">Korea, Republic Of</option>
<option value="KV">Kosovo</option>
<option value="KW">Kuwait</option>
<option value="KG">Kyrgyzstan</option>
<option value="LA">Lao People&#39;s Democratic Rep</option>
<option value="LV">Latvia</option>
<option value="LB">Lebanon</option>
<option value="LS">Lesotho</option>
<option value="LR">Liberia</option>
<option value="LY">Libyan Arab Jamahiriya</option>
<option value="LI">Liechtenstein</option>
<option value="LT">Lithuania</option>
<option value="LU">Luxembourg</option>
<option value="MO">Macao</option>
<option value="MK">Macedonia, Former Yugoslav Rep</option>
<option value="MG">Madagascar</option>
```

```html
<option value="MW">Malawi</option>
<option value="MY">Malaysia</option>
<option value="MV">Maldives</option>
<option value="ML">Mali</option>
<option value="MT">Malta</option>
<option value="MH">Marshall Islands</option>
<option value="MQ">Martinique</option>
<option value="MR">Mauritania</option>
<option value="MU">Mauritius</option>
<option value="YT">Mayotte</option>
<option value="MX">Mexico</option>
<option value="FM">Micronesia, Federated States</option>
<option value="MD">Moldova, Republic Of</option>
<option value="MC">Monaco</option>
<option value="MN">Mongolia</option>
<option value="ME">Montenegro</option>
<option value="MS">Montserrat</option>
<option value="MA">Morocco</option>
<option value="MZ">Mozambique</option>
<option value="MM">Myanmar</option>
<option value="NA">Namibia</option>
<option value="NR">Nauru</option>
<option value="NP">Nepal</option>
<option value="NL">Netherlands</option>
<option value="AN">Netherlands Antilles</option>
<option value="NC">New Caledonia</option>
<option value="NZ">New Zealand</option>
<option value="NI">Nicaragua</option>
<option value="NE">Niger</option>
<option value="NG">Nigeria</option>
<option value="NU">Niue</option>
<option value="NF">Norfolk Island</option>
<option value="MP">Northern Mariana Islands</option>
<option value="NO">Norway</option>
<option value="OM">Oman</option>
<option value="PK">Pakistan</option>
<option value="PW">Palau</option>
<option value="PS">Palestinian Terr, Occupied</option>
<option value="PA">Panama</option>
<option value="PG">Papua New Guinea</option>
<option value="PY">Paraguay</option>
<option value="PE">Peru</option>
<option value="PH">Philippines</option>
<option value="PN">Pitcairn</option>
<option value="PL">Poland</option>
<option value="PT">Portugal</option>
<option value="PR">Puerto Rico</option>
<option value="QA">Qatar</option>
<option value="RE">Reunion</option>
<option value="RO">Romania</option>
<option value="RU">Russian Federation</option>
<option value="RW">Rwanda</option>
<option value="GS">S. Georgia &amp; S. Sandwich Is</option>
<option value="SH">Saint Helena</option>
<option value="KN">Saint Kitts And Nevis</option>
<option value="LC">Saint Lucia</option>
<option value="PM">Saint Pierre and Miquelon</option>
<option value="VC">Saint Vincent &amp; The Grenadines</option>
<option value="WS">Samoa</option>
<option value="SM">San Marino</option>
```

```html
<option value="ST">Sao Tome and Principe</option>
<option value="SA">Saudi Arabia</option>
<option value="SN">Senegal</option>
<option value="RS">Serbia</option>
<option value="CS">Serbia and Montenegro</option>
<option value="SC">Seychelles</option>
<option value="SL">Sierra Leone</option>
<option value="SG">Singapore</option>
<option value="SK">Slovakia</option>
<option value="SI">Slovenia</option>
<option value="SB">Solomon Islands</option>
<option value="SO">Somalia</option>
<option value="ZA">South Africa</option>
<option value="ES">Spain</option>
<option value="LK">Sri Lanka</option>
<option value="SD">Sudan</option>
<option value="SR">Suriname</option>
<option value="SJ">Svalbard and Jan Mayen</option>
<option value="SZ">Swaziland</option>
<option value="SE">Sweden</option>
<option value="CH">Switzerland</option>
<option value="SY">Syrian Arab Republic</option>
<option value="TW">Taiwan</option>
<option value="TJ">Tajikistan</option>
<option value="TZ">Tanzania, United Republic of</option>
<option value="TH">Thailand</option>
<option value="TL">Timor-Leste</option>
<option value="TG">Togo</option>
<option value="TK">Tokelau</option>
<option value="TO">Tonga</option>
<option value="TT">Trinidad and Tobago</option>
<option value="TN">Tunisia</option>
<option value="TR">Turkey</option>
<option value="TM">Turkmenistan</option>
<option value="TC">Turks and Caicos Islands</option>
<option value="TV">Tuvalu</option>
<option value="UG">Uganda</option>
<option value="UA">Ukraine</option>
<option value="AE">United Arab Emirates</option>
<option value="GB">United Kingdom</option>
<option value="UM">United States Minor Outlying Islands</option>
<option value="UY">Uruguay</option>
<option value="UZ">Uzbekistan</option>
<option value="VU">Vanuatu</option>
<option value="VE">Venezuela</option>
<option value="VN">Viet Nam</option>
<option value="VG">Virgin Islands, British</option>
<option value="VI">Virgin Islands, U.S.</option>
<option value="WF">Wallis and Futuna</option>
<option value="EH">Western Sahara</option>
<option value="YE">Yemen</option>
<option value="ZM">Zambia</option>
<option value="ZW">Zimbabwe</option></select>


                            </font>

                        </TD>
                    </TR>
```

```
    </Table>




                    </td>

            </tr>

            <tr>

                <td align="left" valign="top">


<Table>

                                <TR>
                                    <TD colspan="2">
















                                    </TD>
                                </TR>


</Table>



                    </td>

            </tr>

            <tr>

                <td align="left" valign="top">


<Table>

                                <TR>
                                    <TD colspan="2">
```

```html
 <font class="group_title">Mailing Address</font><font
class="small_italic"> (only enter a mailing address if it is
different than the street address)</font>


                                    </TD>
                                </TR>


</Table>


            </td>

        </tr>

        <tr>

            <td align="left" valign="top">


<Table>

                            <TR>
                                    <TD colspan="2">


                                    </TD>
                                </TR>


</Table>


            </td>

        </tr>

        <tr>
```

```html
            <td align="left" valign="top">


<Table>

                                <TR>
                                    <TD align="left" >

                                                    <font size="-1"
face="Arial, Helvetica, sans-serif">Address 1:</font>

                                    </TD>
                                    <TD>
                                        <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="principalMailingStreet1"
maxlength="35" size="20" value="5120 N. Broadway Apt302">


                                        </font>

                                    </TD>
                                </TR>

                                <TR>
                                    <TD align="left" >

                                                    <font size="-1"
face="Arial, Helvetica, sans-serif">Address 2:</font>

                                    </TD>
                                    <TD>
                                        <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="principalMailingStreet2"
maxlength="35" size="20" value="0000">


                                        </font>

                                    </TD>
                                </TR>
```

```
                                            <TR>
                                                <TD align="left" >

                                                                                  <font size="-1"
face="Arial, Helvetica, sans-serif">City:</font>

                                                </TD>
                                                <TD>
                                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="principalMailingCity"
maxlength="35" size="20" value="Denver">


                                                    </font>

                                                </TD>
                                            </TR>

                                            <TR>
                                                <TD align="left" >

                                                                                  <font size="-1"
face="Arial, Helvetica, sans-serif">State:</font>

                                                </TD>
                                                <TD>
                                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">
                                                    <select
name="principalMailingState" size="1"><option value=""></option>

                            <option value="OT">Outside US/Canada</option>
<option value="AL">Alabama</option>
<option value="AK">Alaska</option>
<option value="AS">American Samoa</option>
<option value="AZ">Arizona</option>
<option value="AR">Arkansas</option>
<option value="CA">California</option>
<option value="CO" selected="selected">Colorado</option>
<option value="MP">Commonwealth of the Northern Mariana
Islands</option>
<option value="CT">Connecticut</option>
<option value="DE">Delaware</option>
<option value="DC">District Of Columbia</option>
<option value="FM">Federated States of Micronesia</option>
<option value="FL">Florida</option>
<option value="GA">Georgia</option>
<option value="GU">Guam</option>
<option value="HI">Hawaii</option>
<option value="ID">Idaho</option>
<option value="IL">Illinois</option>
```

```html
<option value="IN">Indiana</option>
<option value="IA">Iowa</option>
<option value="KS">Kansas</option>
<option value="KY">Kentucky</option>
<option value="LA">Louisiana</option>
<option value="ME">Maine</option>
<option value="MH">Marshall Islands</option>
<option value="MD">Maryland</option>
<option value="MA">Massachusetts</option>
<option value="MI">Michigan</option>
<option value="MN">Minnesota</option>
<option value="MS">Mississippi</option>
<option value="MO">Missouri</option>
<option value="MT">Montana</option>
<option value="NE">Nebraska</option>
<option value="NV">Nevada</option>
<option value="NH">New Hampshire</option>
<option value="NJ">New Jersey</option>
<option value="NM">New Mexico</option>
<option value="NY">New York</option>
<option value="NC">North Carolina</option>
<option value="ND">North Dakota</option>
<option value="OH">Ohio</option>
<option value="OK">Oklahoma</option>
<option value="OR">Oregon</option>
<option value="PW">Palau</option>
<option value="PA">Pennsylvania</option>
<option value="PR">Puerto Rico</option>
<option value="RI">Rhode Island</option>
<option value="SC">South Carolina</option>
<option value="SD">South Dakota</option>
<option value="TN">Tennessee</option>
<option value="TX">Texas</option>
<option value="VI">US Virgin Islands</option>
<option value="UT">Utah</option>
<option value="VT">Vermont</option>
<option value="VA">Virginia</option>
<option value="WA">Washington</option>
<option value="WV">West Virginia</option>
<option value="WI">Wisconsin</option>
<option value="WY">Wyoming</option>
<option value="AB">Alberta</option>
<option value="BC">British Columbia</option>
<option value="MB">Manitoba</option>
<option value="NB">New Brunswick</option>
<option value="NL">Newfoundland and Labrador</option>
<option value="NT">Northwest Territories</option>
<option value="NS">Nova Scotia</option>
<option value="NU">Nunavut</option>
<option value="ON">Ontario</option>
<option value="PE">Prince Edward Island</option>
<option value="QC">Quebec</option>
<option value="SK">Saskatchewan</option>
<option value="YT">Yukon</option>
<option value="AA">AA</option>
<option value="AE">AE</option>
<option value="AP">AP</option></select>

                                </font>
```

```html
							</TD>
						</TR>

						<TR>
							<TD align="left" >

														<font size="-1"
face="Arial, Helvetica, sans-serif">Zip/Postal Code:</font>

							</TD>
							<TD>
								<font class="staticTextValue"
face="Times New Roman, Times, serif">




         <input type="text" name="principalMailingZip" maxlength="10"
size="10" value="80216">


								</font>

							</TD>
						</TR>

						<TR>
							<TD align="left" >

														<font size="-1"
face="Arial, Helvetica, sans-serif">Province:</font>

							</TD>
							<TD>
								<font class="staticTextValue"
face="Times New Roman, Times, serif">




         <input type="text" name="principalMailingProvince"
maxlength="35" size="20" value="Federal Reserve District 10">


								</font>

							</TD>
						</TR>

						<TR>
							<TD align="left" >
```

```html
                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">Country:</font>

                                        </TD>
                                        <TD>
                                            <font class="staticTextValue"
face="Times New Roman, Times, serif">
                                            <select
name="principalMailingCountry" size="1"><option value=""></option>

                        <option value="US" selected="selected">United
States</option>
<option value="AF">Afghanistan</option>
<option value="AL">Albania</option>
<option value="DZ">Algeria</option>
<option value="AS">American Samoa</option>
<option value="AD">Andorra</option>
<option value="AO">Angola</option>
<option value="AI">Anguilla</option>
<option value="AQ">Antarctica</option>
<option value="AG">Antigua and Barbuda</option>
<option value="AR">Argentina</option>
<option value="AM">Armenia</option>
<option value="AW">Aruba</option>
<option value="AU">Australia</option>
<option value="AT">Austria</option>
<option value="AZ">Azerbaijan</option>
<option value="BS">Bahamas</option>
<option value="BH">Bahrain</option>
<option value="BD">Bangladesh</option>
<option value="BB">Barbados</option>
<option value="BY">Belarus</option>
<option value="BE">Belgium</option>
<option value="BZ">Belize</option>
<option value="BJ">Benin</option>
<option value="BM">Bermuda</option>
<option value="BT">Bhutan</option>
<option value="BO">Bolivia</option>
<option value="BA">Bosnia and Herzegovina</option>
<option value="BW">Botswana</option>
<option value="BV">Bouvet Island</option>
<option value="BR">Brazil</option>
<option value="IO">British Indian Ocean Terr</option>
<option value="BN">Brunei Darussalam</option>
<option value="BG">Bulgaria</option>
<option value="BF">Burkina Faso</option>
<option value="BI">Burundi</option>
<option value="KH">Cambodia</option>
<option value="CM">Cameroon</option>
<option value="CA">Canada</option>
<option value="CV">Cape Verde</option>
<option value="KY">Cayman Islands</option>
<option value="CF">Central African Republic</option>
<option value="TD">Chad</option>
<option value="CHI">Channel Islands</option>
<option value="CL">Chile</option>
<option value="CN">China</option>
<option value="CX">Christmas Island</option>
<option value="CC">Cocos (Keeling) Islands</option>
```

```html
<option value="CO">Colombia</option>
<option value="KM">Comoros</option>
<option value="CG">Congo</option>
<option value="CD">Congo, Democratic Republic of</option>
<option value="CK">Cook Islands</option>
<option value="CR">Costa Rica</option>
<option value="CI">Cote D&#39;Ivoire</option>
<option value="HR">Croatia</option>
<option value="CU">Cuba</option>
<option value="CY">Cyprus</option>
<option value="CZ">Czech Republic</option>
<option value="DK">Denmark</option>
<option value="DJ">Djibouti</option>
<option value="DM">Dominica</option>
<option value="DO">Dominican Republic</option>
<option value="EC">Ecuador</option>
<option value="EG">Egypt</option>
<option value="SV">El Salvador</option>
<option value="GQ">Equatorial Guinea</option>
<option value="ER">Eritrea</option>
<option value="EE">Estonia</option>
<option value="ET">Ethiopia</option>
<option value="FK">Falkland Islands (Malvinas)</option>
<option value="FO">Faroe Islands</option>
<option value="FJ">Fiji</option>
<option value="FI">Finland</option>
<option value="FR">France</option>
<option value="GF">French Guiana</option>
<option value="PF">French Polynesia</option>
<option value="TF">French Southern Territories</option>
<option value="GA">Gabon</option>
<option value="GM">Gambia</option>
<option value="GE">Georgia</option>
<option value="DE">Germany</option>
<option value="GH">Ghana</option>
<option value="GI">Gibraltar</option>
<option value="GR">Greece</option>
<option value="GL">Greenland</option>
<option value="GD">Grenada</option>
<option value="GP">Guadeloupe</option>
<option value="GU">Guam</option>
<option value="GT">Guatemala</option>
<option value="GN">Guinea</option>
<option value="GW">Guinea-Bissau</option>
<option value="GY">Guyana</option>
<option value="HT">Haiti</option>
<option value="HM">Heard Island &amp; Mcdonald Islands</option>
<option value="VA">Holy See (Vatican City St)</option>
<option value="HN">Honduras</option>
<option value="HK">Hong Kong</option>
<option value="HU">Hungary</option>
<option value="IS">Iceland</option>
<option value="IN">India</option>
<option value="ID">Indonesia</option>
<option value="IR">Iran, Islamic Republic Of</option>
<option value="IQ">Iraq</option>
<option value="IE">Ireland</option>
<option value="IL">Israel</option>
<option value="IT">Italy</option>
<option value="JM">Jamaica</option>
```

```html
<option value="JP">Japan</option>
<option value="JO">Jordan</option>
<option value="KZ">Kazakhstan</option>
<option value="KE">Kenya</option>
<option value="KI">Kiribati</option>
<option value="KP">Korea, Democratic People&#39;s Rep</option>
<option value="KR">Korea, Republic Of</option>
<option value="KV">Kosovo</option>
<option value="KW">Kuwait</option>
<option value="KG">Kyrgyzstan</option>
<option value="LA">Lao People&#39;s Democratic Rep</option>
<option value="LV">Latvia</option>
<option value="LB">Lebanon</option>
<option value="LS">Lesotho</option>
<option value="LR">Liberia</option>
<option value="LY">Libyan Arab Jamahiriya</option>
<option value="LI">Liechtenstein</option>
<option value="LT">Lithuania</option>
<option value="LU">Luxembourg</option>
<option value="MO">Macao</option>
<option value="MK">Macedonia, Former Yugoslav Rep</option>
<option value="MG">Madagascar</option>
<option value="MW">Malawi</option>
<option value="MY">Malaysia</option>
<option value="MV">Maldives</option>
<option value="ML">Mali</option>
<option value="MT">Malta</option>
<option value="MH">Marshall Islands</option>
<option value="MQ">Martinique</option>
<option value="MR">Mauritania</option>
<option value="MU">Mauritius</option>
<option value="YT">Mayotte</option>
<option value="MX">Mexico</option>
<option value="FM">Micronesia, Federated States</option>
<option value="MD">Moldova, Republic Of</option>
<option value="MC">Monaco</option>
<option value="MN">Mongolia</option>
<option value="ME">Montenegro</option>
<option value="MS">Montserrat</option>
<option value="MA">Morocco</option>
<option value="MZ">Mozambique</option>
<option value="MM">Myanmar</option>
<option value="NA">Namibia</option>
<option value="NR">Nauru</option>
<option value="NP">Nepal</option>
<option value="NL">Netherlands</option>
<option value="AN">Netherlands Antilles</option>
<option value="NC">New Caledonia</option>
<option value="NZ">New Zealand</option>
<option value="NI">Nicaragua</option>
<option value="NE">Niger</option>
<option value="NG">Nigeria</option>
<option value="NU">Niue</option>
<option value="NF">Norfolk Island</option>
<option value="MP">Northern Mariana Islands</option>
<option value="NO">Norway</option>
<option value="OM">Oman</option>
<option value="PK">Pakistan</option>
<option value="PW">Palau</option>
<option value="PS">Palestinian Terr, Occupied</option>
```

```html
<option value="PA">Panama</option>
<option value="PG">Papua New Guinea</option>
<option value="PY">Paraguay</option>
<option value="PE">Peru</option>
<option value="PH">Philippines</option>
<option value="PN">Pitcairn</option>
<option value="PL">Poland</option>
<option value="PT">Portugal</option>
<option value="PR">Puerto Rico</option>
<option value="QA">Qatar</option>
<option value="RE">Reunion</option>
<option value="RO">Romania</option>
<option value="RU">Russian Federation</option>
<option value="RW">Rwanda</option>
<option value="GS">S. Georgia &amp; S. Sandwich Is</option>
<option value="SH">Saint Helena</option>
<option value="KN">Saint Kitts And Nevis</option>
<option value="LC">Saint Lucia</option>
<option value="PM">Saint Pierre and Miquelon</option>
<option value="VC">Saint Vincent &amp; The Grenadines</option>
<option value="WS">Samoa</option>
<option value="SM">San Marino</option>
<option value="ST">Sao Tome and Principe</option>
<option value="SA">Saudi Arabia</option>
<option value="SN">Senegal</option>
<option value="RS">Serbia</option>
<option value="CS">Serbia and Montenegro</option>
<option value="SC">Seychelles</option>
<option value="SL">Sierra Leone</option>
<option value="SG">Singapore</option>
<option value="SK">Slovakia</option>
<option value="SI">Slovenia</option>
<option value="SB">Solomon Islands</option>
<option value="SO">Somalia</option>
<option value="ZA">South Africa</option>
<option value="ES">Spain</option>
<option value="LK">Sri Lanka</option>
<option value="SD">Sudan</option>
<option value="SR">Suriname</option>
<option value="SJ">Svalbard and Jan Mayen</option>
<option value="SZ">Swaziland</option>
<option value="SE">Sweden</option>
<option value="CH">Switzerland</option>
<option value="SY">Syrian Arab Republic</option>
<option value="TW">Taiwan</option>
<option value="TJ">Tajikistan</option>
<option value="TZ">Tanzania, United Republic of</option>
<option value="TH">Thailand</option>
<option value="TL">Timor-Leste</option>
<option value="TG">Togo</option>
<option value="TK">Tokelau</option>
<option value="TO">Tonga</option>
<option value="TT">Trinidad and Tobago</option>
<option value="TN">Tunisia</option>
<option value="TR">Turkey</option>
<option value="TM">Turkmenistan</option>
<option value="TC">Turks and Caicos Islands</option>
<option value="TV">Tuvalu</option>
<option value="UG">Uganda</option>
<option value="UA">Ukraine</option>
```

```html
<option value="AE">United Arab Emirates</option>
<option value="GB">United Kingdom</option>
<option value="UM">United States Minor Outlying Islands</option>
<option value="UY">Uruguay</option>
<option value="UZ">Uzbekistan</option>
<option value="VU">Vanuatu</option>
<option value="VE">Venezuela</option>
<option value="VN">Viet Nam</option>
<option value="VG">Virgin Islands, British</option>
<option value="VI">Virgin Islands, U.S.</option>
<option value="WF">Wallis and Futuna</option>
<option value="EH">Western Sahara</option>
<option value="YE">Yemen</option>
<option value="ZM">Zambia</option>
<option value="ZW">Zimbabwe</option></select>


                                    </font>

                                </TD>
                            </TR>


</Table>


            </td>

        </tr>

        <tr>

            <td align="left" valign="top">


<Table>


</Table>


            </td>

        </tr>

</Table>


                        </TD>
                    </TR>

</TD></TR>
<TR><TD colspan="2"><HR></TD></TR>
                                <TR>
                                        <TD colspan="2">
```

The registered agent name and registered agent address of the
entity's registered agent are

```
                        </TD>
                    </TR>
                <TR><TD colspan="2"><BR></TD></TR>
                    <TR>
                            <TD colspan="2">
```

```html
<table border="0">
  <tr>

      <td colspan="4">
        Name <span class='redText'>*</span><br>   (If
an individual)
      </td>

    <td width=150>
      Last Name
      <input type="text" name="RegAgentPersonName_lastName"
maxlength="35" size="15" value="">
    </td>
    <td width=150>
      First Name
      <input type="text" name="RegAgentPersonName_firstName"
maxlength="35" size="15" value="">
    </td>
    <td width=150>
      Middle Name
      <input type="text" name="RegAgentPersonName_middleName"
maxlength="35" size="15" value="">
    </td>
    <td width=50>
      Suffix
        <select name="RegAgentPersonName_suffixName" size="1">
<option value="" selected="selected"></option>
<option value="Sr.">Sr.</option>
<option value="Jr.">Jr.</option>
<option value="II">II</option>
<option value="III">III</option>
<option value="IV">IV</option>
<option value="V">V</option>
<option value="VI">VI</option>
<option value="VII">VII</option>
<option value="VIII">VIII</option>
<option value="IX">IX</option>
<option value="X">X</option></select>
    </td>
```

```
  </tr>
</table>




                              </TD>
                        </TR>
                     <TR><TD colspan="2"><table>
    <tr>
        <td width="9%"> </td>
        <td width="5%"><hr></td>
        <td width="3%"><strong><font color="#666666" size="3"
face="Times New Roman, Times, serif">OR</font></strong></td>
        <td width="6%"><hr></td>
        <td width="21%"><strong></strong></td>
        <td width="956"> </td>
    </tr>
</table></TD></TR>  <TR><TD colspan="2">
                      <TR>
                         <TD colspan="2">


<Table border="0">

         <tr>

            <td align="left" valign="top">


<Table>

                            <TR>
                               <TD align="left" >

                                            <font size="-1"
face="Arial, Helvetica, sans-serif">   (If an
entity)     </font>

                               </TD>
                               <TD>
                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="regAgentEntityName" maxlength="250"
size="75" value="BITs EXCHANGE">


                                    </font>

                               </TD>
                            </TR>


</Table>
```

```html
          </td>

        </tr>

</Table>




                  </TD>
                </TR>

</TD></TR>
                          <TR>
                            <TD colspan="2">
```

    (Caution: Do not provide both an individual and an entity name.)

```html
                              </TD>
                          </TR>
                      <TR><TD colspan="2"><BR></TD></TR><TR><TD
colspan="2">
                    <TR>
                      <TD colspan="2">

<Table border="0">

        <tr>

            <td align="left" valign="top">

            </td>

            <td align="left" valign="top">

            </td>

            <td align="left" valign="top">


<Table>

                            <TR>
                                <TD colspan="2">
```

```html
 <font class="group_title">Street Address</font>


						</TD>
					</TR>


</Table>



			</td>

		</tr>

		<tr>

			<td align="left" valign="top">

			</td>

			<td align="left" valign="top">

			</td>

			<td align="left" valign="top">


	<Table>

						<TR>
							<TD colspan="2">




							</TD>
						</TR>
```

```html
</Table>


                </td>

            </tr>

            <tr>

                <td align="left" valign="top">

                </td>

                <td align="left" valign="top">

                </td>

                <td align="left" valign="top">


<Table>

                                <TR>
                                    <TD align="left" >

                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">Address 1:</font>

                                    </TD>
                                    <TD>
                                        <font class="staticTextValue"
face="Times New Roman, Times, serif">






        <input type="text" name="regAgentStreet1" maxlength="35"
size="20" value="5120 N. Broadway Apt302">


                                        </font>
                                    <span class='redText'>*</span>
                                    </TD>
                                </TR>

                                <TR>
                                    <TD align="left" >

                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">Address 2:</font>

                                    </TD>
                                    <TD>
```

```html
                                                        <font class="staticTextValue"
face="Times New Roman, Times, serif">


        <input type="text" name="regAgentStreet2" maxlength="35"
size="20" value="0000">


                                        </font>

                                    </TD>
                                </TR>

                                <TR>
                                    <TD align="left" >

                                                    <font size="-1"
face="Arial, Helvetica, sans-serif">City:</font>

                                    </TD>
                                    <TD>
                                        <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="regAgentCity" maxlength="35"
size="20" value="Denver">


                                        </font>
                                    <span class='redText'>*</span>
                                    </TD>
                                </TR>

                                <TR>
                                    <TD align="left" >

                                                    <font size="-1"
face="Arial, Helvetica, sans-serif">State:</font>

                                    </TD>
                                    <TD>
                                        <font class="staticTextValue"
face="Times New Roman, Times, serif">
```

CO

```
<input type="hidden" name="regAgentState" value="CO">
```

```
                          </font>

                        </TD>
                      </TR>

                      <TR>
                        <TD align="left" >

                                                  <font size="-1"
face="Arial, Helvetica, sans-serif">Zip:</font>

                        </TD>
                        <TD>
                          <font class="staticTextValue"
face="Times New Roman, Times, serif">
```

```
<input type="text" name="regAgentZip" maxlength="10"
size="10" value="80216">
```

```
                          </font>
                        <span class='redText'>*</span>
                        </TD>
                      </TR>
```

```
</Table>
```

```
          </td>

        </tr>

        <tr>

          <td align="left" valign="top">
```

```html
                                    </td>
                                    <td align="left" valign="top">
                                    </td>
                                    <td align="left" valign="top">


            <Table>

                                            <TR>
                                                    <TD colspan="2">




                                                    </TD>
                                            </TR>


            </Table>


                                    </td>
                            </tr>
                            <tr>
                                    <td align="left" valign="top">
                                    </td>
                                    <td align="left" valign="top">
                                    </td>
                                    <td align="left" valign="top">


            <Table>

                                            <TR>
                                                    <TD colspan="2">
```

```
 <font class="group_title">Mailing Address</font><font
class="small_italic"> (only enter a mailing address if it is
different than the street address)</font>


                                        </TD>
                                </TR>


</Table>


                </td>

        </tr>

        <tr>

            <td align="left" valign="top">

            </td>

            <td align="left" valign="top">

            </td>

            <td align="left" valign="top">


<Table>

                                <TR>
                                        <TD colspan="2">











                                </TD>
```

```html
                                                            </TR>


</Table>


                        </td>

                </tr>

                <tr>

                    <td align="left" valign="top">

                    </td>

                    <td align="left" valign="top">

                    </td>

                    <td align="left" valign="top">


<Table>

                                        <TR>
                                            <TD align="left" >

                                                                <font size="-1"
face="Arial, Helvetica, sans-serif">Address 1:</font>

                                            </TD>
                                            <TD>
                                                <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="regAgentMailingStreet1"
maxlength="35" size="20" value="5120 N. Broadway Apt302">


                                                </font>

                                            </TD>
                                        </TR>

                                        <TR>
                                            <TD align="left" >

                                                                <font size="-1"
face="Arial, Helvetica, sans-serif">Address 2:</font>

                                            </TD>
```

```html
                                                <TD>
                                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">

        <input type="text" name="regAgentMailingStreet2"
maxlength="35" size="20" value="0000">

                                                    </font>

                                                </TD>
                                            </TR>

                                            <TR>
                                                <TD align="left" >

                                                                <font size="-1"
face="Arial, Helvetica, sans-serif">City:</font>

                                                </TD>
                                                <TD>
                                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">

        <input type="text" name="regAgentMailingCity" maxlength="35"
size="20" value="Denver">

                                                    </font>

                                                </TD>
                                            </TR>

                                            <TR>
                                                <TD align="left" >

                                                                <font size="-1"
face="Arial, Helvetica, sans-serif">State:</font>

                                                </TD>
                                                <TD>
                                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">
```

CO

```
            <input type="hidden" name="regAgentMailingState" value="CO">
```

```
                                </font>
```

```
                            </TD>
                        </TR>
```

```
                        <TR>
                            <TD align="left" >
```

```
                                            <font size="-1"
face="Arial, Helvetica, sans-serif">Zip:</font>
```

```
                            </TD>
                            <TD>
                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">
```

```
            <input type="text" name="regAgentMailingZip" maxlength="10"
size="10" value="80216">
```

```
                                </font>
```

```
                            </TD>
                        </TR>
```

```
</Table>
```

```
                </td>
```

```
            </tr>
```

```
            <tr>
```

```html
            <td align="left" valign="top">

            </td>

            <td align="left" valign="top">

            </td>

            <td align="left" valign="top">


<Table>

</Table>



            </td>

        </tr>

</Table>



                    </TD>
                </TR>

</TD></TR><TR><TD colspan="2"><BR></TD></TR><TR><TD colspan="2">
<HR></TD></TR>
                            <TR>
                                <TD colspan="2">
```

 (Caution: The registered agent MUST consent to being appointed as the registered agent.)
(The following statement is adopted by marking the box.)

```html
                                </TD>
                            </TR>

                            <TR>
                                <TD colspan="2">
```

```
<input type="checkbox" name="regAgentConsent" value="Y"
checked="checked">
<INPUT type="hidden" name="regAgentConsent"
    value="N">

<b>
 The person appointed as registered agent has consented to being so
appointed.
</b>




                                    </TD>
                                </TR>


<TR><TD colspan="2"><HR></TD></TR>
                                <TR>
                                        <TD colspan="2">
```

  The true name and mailing address of the incorporator are:

```
                                    </TD>
                                </TR>
                            <TR><TD colspan="2"><BR></TD></TR>
                                <TR>
                                        <TD colspan="2">


<table border="0">
  <tr>

      <td colspan="4">
        Name <span class='redText'>*</span><br>   (If
an individual)
      </td>

    <td width=150>
```

```html
      Last Name
      <input type="text" name="Incorporator1PersonName_lastName"
maxlength="35" size="15" value="">
    </td>
    <td width=150>
      First Name
      <input type="text" name="Incorporator1PersonName_firstName"
maxlength="35" size="15" value="">
    </td>
    <td width=150>
      Middle Name
      <input type="text" name="Incorporator1PersonName_middleName"
maxlength="35" size="15" value="">
    </td>
    <td width=50>
      Suffix
        <select name="Incorporator1PersonName_suffixName" size="1">
<option value="" selected="selected"></option>
<option value="Sr.">Sr.</option>
<option value="Jr.">Jr.</option>
<option value="II">II</option>
<option value="III">III</option>
<option value="IV">IV</option>
<option value="V">V</option>
<option value="VI">VI</option>
<option value="VII">VII</option>
<option value="VIII">VIII</option>
<option value="IX">IX</option>
<option value="X">X</option></select>
    </td>
  </tr>
</table>




                              </TD>
                            </TR>
                         <TR><TD colspan="2"><table>
    <tr>
        <td width="9%"> </td>
        <td width="5%"><hr></td>
        <td width="3%"><strong><font color="#666666" size="3"
face="Times New Roman, Times, serif">OR</font></strong></td>
        <td width="6%"><hr></td>
        <td width="21%"><strong></strong></td>
        <td width="956"> </td>
    </tr>
</table></TD></TR>   <TR><TD colspan="2">
                     <TR>
                         <TD colspan="2">


<Table border="0">

        <tr>

            <td align="left" valign="top">


<Table>
```

```
                                    <TR>
                                        <TD align="left" >

                                                                    <font size="-1"
face="Arial, Helvetica, sans-serif">   (If an
entity)     </font>

                                        </TD>
                                        <TD>
                                            <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="incorporator1EntityName"
maxlength="250" size="75" value="CLM ~ Concepts Learning Machine
Limited Liability Company">


                                    </font>

                                    </TD>
                                    </TR>


</Table>


            </td>

        </tr>

</Table>



                        </TD>
                    </TR>

</TD></TR>
                            <TR>
                                <TD colspan="2">
```

```
         <font class="small_italic">(Caution: Do not
provide both an individual and an entity name.)</font>



                                    </TD>
                                </TR>
                            <TR><TD colspan="2"><BR></TD></TR><TR><TD
colspan="2">
                        <TR>
                            <TD colspan="2">

<Table border="0">

        <tr>

            <td align="left" valign="top">


<Table>

                                <TR>
                                    <TD colspan="2">












 <u>Mailing</u> Address


                                    </TD>
                                </TR>


</Table>



            </td>

        </tr>

        <tr>

            <td align="left" valign="top">


<Table>

                                <TR>
                                    <TD align="left" >

                                                    <font size="-1"
```

```
                                                face="Arial, Helvetica, sans-serif">Address 1:</font>

                                            </TD>
                                            <TD>
                                                <font class="staticTextValue"
face="Times New Roman, Times, serif">




            <input type="text" name="incorporator1Street1"
maxlength="35" size="20" value="5120 N. Broadway Apt302">

                                                </font>
                                            <span class='redText'>*</span>
                                            </TD>
                                        </TR>

                                        <TR>
                                            <TD align="left" >

                                                                <font size="-1"
face="Arial, Helvetica, sans-serif">Address 2:</font>

                                            </TD>
                                            <TD>
                                                <font class="staticTextValue"
face="Times New Roman, Times, serif">




            <input type="text" name="incorporator1Street2"
maxlength="35" size="20" value="0000">


                                                </font>

                                            </TD>
                                        </TR>

                                        <TR>
                                            <TD align="left" >

                                                                <font size="-1"
face="Arial, Helvetica, sans-serif">City:</font>

                                            </TD>
                                            <TD>
                                                <font class="staticTextValue"
face="Times New Roman, Times, serif">
```

```html
        <input type="text" name="incorporator1City" maxlength="35"
size="20" value="Denver">


                                </font>
                            <span class='redText'>*</span>
                            </TD>
                        </TR>

                        <TR>
                            <TD align="left" >

                                                    <font size="-1"
face="Arial, Helvetica, sans-serif">State:</font>

                            </TD>
                            <TD>
                                <font class="staticTextValue"
face="Times New Roman, Times, serif">
                                <select
name="incorporator1State" size="1"><option value=""></option>

                    <option value="OT">Outside US/Canada</option>
<option value="AL">Alabama</option>
<option value="AK">Alaska</option>
<option value="AS">American Samoa</option>
<option value="AZ">Arizona</option>
<option value="AR">Arkansas</option>
<option value="CA">California</option>
<option value="CO" selected="selected">Colorado</option>
<option value="MP">Commonwealth of the Northern Mariana
Islands</option>
<option value="CT">Connecticut</option>
<option value="DE">Delaware</option>
<option value="DC">District Of Columbia</option>
<option value="FM">Federated States of Micronesia</option>
<option value="FL">Florida</option>
<option value="GA">Georgia</option>
<option value="GU">Guam</option>
<option value="HI">Hawaii</option>
<option value="ID">Idaho</option>
<option value="IL">Illinois</option>
<option value="IN">Indiana</option>
<option value="IA">Iowa</option>
<option value="KS">Kansas</option>
<option value="KY">Kentucky</option>
<option value="LA">Louisiana</option>
<option value="ME">Maine</option>
<option value="MH">Marshall Islands</option>
<option value="MD">Maryland</option>
<option value="MA">Massachusetts</option>
<option value="MI">Michigan</option>
```

```html
<option value="MN">Minnesota</option>
<option value="MS">Mississippi</option>
<option value="MO">Missouri</option>
<option value="MT">Montana</option>
<option value="NE">Nebraska</option>
<option value="NV">Nevada</option>
<option value="NH">New Hampshire</option>
<option value="NJ">New Jersey</option>
<option value="NM">New Mexico</option>
<option value="NY">New York</option>
<option value="NC">North Carolina</option>
<option value="ND">North Dakota</option>
<option value="OH">Ohio</option>
<option value="OK">Oklahoma</option>
<option value="OR">Oregon</option>
<option value="PW">Palau</option>
<option value="PA">Pennsylvania</option>
<option value="PR">Puerto Rico</option>
<option value="RI">Rhode Island</option>
<option value="SC">South Carolina</option>
<option value="SD">South Dakota</option>
<option value="TN">Tennessee</option>
<option value="TX">Texas</option>
<option value="VI">US Virgin Islands</option>
<option value="UT">Utah</option>
<option value="VT">Vermont</option>
<option value="VA">Virginia</option>
<option value="WA">Washington</option>
<option value="WV">West Virginia</option>
<option value="WI">Wisconsin</option>
<option value="WY">Wyoming</option>
<option value="AB">Alberta</option>
<option value="BC">British Columbia</option>
<option value="MB">Manitoba</option>
<option value="NB">New Brunswick</option>
<option value="NL">Newfoundland and Labrador</option>
<option value="NT">Northwest Territories</option>
<option value="NS">Nova Scotia</option>
<option value="NU">Nunavut</option>
<option value="ON">Ontario</option>
<option value="PE">Prince Edward Island</option>
<option value="QC">Quebec</option>
<option value="SK">Saskatchewan</option>
<option value="YT">Yukon</option>
<option value="AA">AA</option>
<option value="AE">AE</option>
<option value="AP">AP</option></select>


                              </font>
                          <span class='redText'>*</span>
                          </TD>
                      </TR>

                      <TR>
                          <TD align="left" >

                                              <font size="-1"
face="Arial, Helvetica, sans-serif">Zip/Postal Code:</font>
```

```html
                                                </TD>
                                                <TD>
                                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="incorporator1Zip" maxlength="10"
size="10" value="80216">



                                                    </font>
                                                <span class='redText'>*</span>
                                                </TD>
                                            </TR>

                                            <TR>
                                                <TD align="left" >

                                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">Province:</font>

                                                </TD>
                                                <TD>
                                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="incorporator1Province"
maxlength="35" size="20" value="Federal Reserve District 10">



                                                    </font>

                                                </TD>
                                            </TR>

                                            <TR>
                                                <TD align="left" >

                                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">Country:</font>
                                                </TD>
                                                <TD>
                                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">
                                                    <select
name="incorporator1Country" size="1"><option value=""></option>
```

```html
                                <option value="US" selected="selected">United
States</option>
<option value="AF">Afghanistan</option>
<option value="AL">Albania</option>
<option value="DZ">Algeria</option>
<option value="AS">American Samoa</option>
<option value="AD">Andorra</option>
<option value="AO">Angola</option>
<option value="AI">Anguilla</option>
<option value="AQ">Antarctica</option>
<option value="AG">Antigua and Barbuda</option>
<option value="AR">Argentina</option>
<option value="AM">Armenia</option>
<option value="AW">Aruba</option>
<option value="AU">Australia</option>
<option value="AT">Austria</option>
<option value="AZ">Azerbaijan</option>
<option value="BS">Bahamas</option>
<option value="BH">Bahrain</option>
<option value="BD">Bangladesh</option>
<option value="BB">Barbados</option>
<option value="BY">Belarus</option>
<option value="BE">Belgium</option>
<option value="BZ">Belize</option>
<option value="BJ">Benin</option>
<option value="BM">Bermuda</option>
<option value="BT">Bhutan</option>
<option value="BO">Bolivia</option>
<option value="BA">Bosnia and Herzegovina</option>
<option value="BW">Botswana</option>
<option value="BV">Bouvet Island</option>
<option value="BR">Brazil</option>
<option value="IO">British Indian Ocean Terr</option>
<option value="BN">Brunei Darussalam</option>
<option value="BG">Bulgaria</option>
<option value="BF">Burkina Faso</option>
<option value="BI">Burundi</option>
<option value="KH">Cambodia</option>
<option value="CM">Cameroon</option>
<option value="CA">Canada</option>
<option value="CV">Cape Verde</option>
<option value="KY">Cayman Islands</option>
<option value="CF">Central African Republic</option>
<option value="TD">Chad</option>
<option value="CHI">Channel Islands</option>
<option value="CL">Chile</option>
<option value="CN">China</option>
<option value="CX">Christmas Island</option>
<option value="CC">Cocos (Keeling) Islands</option>
<option value="CO">Colombia</option>
<option value="KM">Comoros</option>
<option value="CG">Congo</option>
<option value="CD">Congo, Democratic Republic of</option>
<option value="CK">Cook Islands</option>
<option value="CR">Costa Rica</option>
<option value="CI">Cote D&#39;Ivoire</option>
<option value="HR">Croatia</option>
<option value="CU">Cuba</option>
<option value="CY">Cyprus</option>
```

```html
<option value="CZ">Czech Republic</option>
<option value="DK">Denmark</option>
<option value="DJ">Djibouti</option>
<option value="DM">Dominica</option>
<option value="DO">Dominican Republic</option>
<option value="EC">Ecuador</option>
<option value="EG">Egypt</option>
<option value="SV">El Salvador</option>
<option value="GQ">Equatorial Guinea</option>
<option value="ER">Eritrea</option>
<option value="EE">Estonia</option>
<option value="ET">Ethiopia</option>
<option value="FK">Falkland Islands (Malvinas)</option>
<option value="FO">Faroe Islands</option>
<option value="FJ">Fiji</option>
<option value="FI">Finland</option>
<option value="FR">France</option>
<option value="GF">French Guiana</option>
<option value="PF">French Polynesia</option>
<option value="TF">French Southern Territories</option>
<option value="GA">Gabon</option>
<option value="GM">Gambia</option>
<option value="GE">Georgia</option>
<option value="DE">Germany</option>
<option value="GH">Ghana</option>
<option value="GI">Gibraltar</option>
<option value="GR">Greece</option>
<option value="GL">Greenland</option>
<option value="GD">Grenada</option>
<option value="GP">Guadeloupe</option>
<option value="GU">Guam</option>
<option value="GT">Guatemala</option>
<option value="GN">Guinea</option>
<option value="GW">Guinea-Bissau</option>
<option value="GY">Guyana</option>
<option value="HT">Haiti</option>
<option value="HM">Heard Island &amp; Mcdonald Islands</option>
<option value="VA">Holy See (Vatican City St)</option>
<option value="HN">Honduras</option>
<option value="HK">Hong Kong</option>
<option value="HU">Hungary</option>
<option value="IS">Iceland</option>
<option value="IN">India</option>
<option value="ID">Indonesia</option>
<option value="IR">Iran, Islamic Republic Of</option>
<option value="IQ">Iraq</option>
<option value="IE">Ireland</option>
<option value="IL">Israel</option>
<option value="IT">Italy</option>
<option value="JM">Jamaica</option>
<option value="JP">Japan</option>
<option value="JO">Jordan</option>
<option value="KZ">Kazakhstan</option>
<option value="KE">Kenya</option>
<option value="KI">Kiribati</option>
<option value="KP">Korea, Democratic People&#39;s Rep</option>
<option value="KR">Korea, Republic Of</option>
<option value="KV">Kosovo</option>
<option value="KW">Kuwait</option>
<option value="KG">Kyrgyzstan</option>
```

```html
<option value="LA">Lao People&#39;s Democratic Rep</option>
<option value="LV">Latvia</option>
<option value="LB">Lebanon</option>
<option value="LS">Lesotho</option>
<option value="LR">Liberia</option>
<option value="LY">Libyan Arab Jamahiriya</option>
<option value="LI">Liechtenstein</option>
<option value="LT">Lithuania</option>
<option value="LU">Luxembourg</option>
<option value="MO">Macao</option>
<option value="MK">Macedonia, Former Yugoslav Rep</option>
<option value="MG">Madagascar</option>
<option value="MW">Malawi</option>
<option value="MY">Malaysia</option>
<option value="MV">Maldives</option>
<option value="ML">Mali</option>
<option value="MT">Malta</option>
<option value="MH">Marshall Islands</option>
<option value="MQ">Martinique</option>
<option value="MR">Mauritania</option>
<option value="MU">Mauritius</option>
<option value="YT">Mayotte</option>
<option value="MX">Mexico</option>
<option value="FM">Micronesia, Federated States</option>
<option value="MD">Moldova, Republic Of</option>
<option value="MC">Monaco</option>
<option value="MN">Mongolia</option>
<option value="ME">Montenegro</option>
<option value="MS">Montserrat</option>
<option value="MA">Morocco</option>
<option value="MZ">Mozambique</option>
<option value="MM">Myanmar</option>
<option value="NA">Namibia</option>
<option value="NR">Nauru</option>
<option value="NP">Nepal</option>
<option value="NL">Netherlands</option>
<option value="AN">Netherlands Antilles</option>
<option value="NC">New Caledonia</option>
<option value="NZ">New Zealand</option>
<option value="NI">Nicaragua</option>
<option value="NE">Niger</option>
<option value="NG">Nigeria</option>
<option value="NU">Niue</option>
<option value="NF">Norfolk Island</option>
<option value="MP">Northern Mariana Islands</option>
<option value="NO">Norway</option>
<option value="OM">Oman</option>
<option value="PK">Pakistan</option>
<option value="PW">Palau</option>
<option value="PS">Palestinian Terr, Occupied</option>
<option value="PA">Panama</option>
<option value="PG">Papua New Guinea</option>
<option value="PY">Paraguay</option>
<option value="PE">Peru</option>
<option value="PH">Philippines</option>
<option value="PN">Pitcairn</option>
<option value="PL">Poland</option>
<option value="PT">Portugal</option>
<option value="PR">Puerto Rico</option>
<option value="QA">Qatar</option>
```

```html
<option value="RE">Reunion</option>
<option value="RO">Romania</option>
<option value="RU">Russian Federation</option>
<option value="RW">Rwanda</option>
<option value="GS">S. Georgia &amp; S. Sandwich Is</option>
<option value="SH">Saint Helena</option>
<option value="KN">Saint Kitts And Nevis</option>
<option value="LC">Saint Lucia</option>
<option value="PM">Saint Pierre and Miquelon</option>
<option value="VC">Saint Vincent &amp; The Grenadines</option>
<option value="WS">Samoa</option>
<option value="SM">San Marino</option>
<option value="ST">Sao Tome and Principe</option>
<option value="SA">Saudi Arabia</option>
<option value="SN">Senegal</option>
<option value="RS">Serbia</option>
<option value="CS">Serbia and Montenegro</option>
<option value="SC">Seychelles</option>
<option value="SL">Sierra Leone</option>
<option value="SG">Singapore</option>
<option value="SK">Slovakia</option>
<option value="SI">Slovenia</option>
<option value="SB">Solomon Islands</option>
<option value="SO">Somalia</option>
<option value="ZA">South Africa</option>
<option value="ES">Spain</option>
<option value="LK">Sri Lanka</option>
<option value="SD">Sudan</option>
<option value="SR">Suriname</option>
<option value="SJ">Svalbard and Jan Mayen</option>
<option value="SZ">Swaziland</option>
<option value="SE">Sweden</option>
<option value="CH">Switzerland</option>
<option value="SY">Syrian Arab Republic</option>
<option value="TW">Taiwan</option>
<option value="TJ">Tajikistan</option>
<option value="TZ">Tanzania, United Republic of</option>
<option value="TH">Thailand</option>
<option value="TL">Timor-Leste</option>
<option value="TG">Togo</option>
<option value="TK">Tokelau</option>
<option value="TO">Tonga</option>
<option value="TT">Trinidad and Tobago</option>
<option value="TN">Tunisia</option>
<option value="TR">Turkey</option>
<option value="TM">Turkmenistan</option>
<option value="TC">Turks and Caicos Islands</option>
<option value="TV">Tuvalu</option>
<option value="UG">Uganda</option>
<option value="UA">Ukraine</option>
<option value="AE">United Arab Emirates</option>
<option value="GB">United Kingdom</option>
<option value="UM">United States Minor Outlying Islands</option>
<option value="UY">Uruguay</option>
<option value="UZ">Uzbekistan</option>
<option value="VU">Vanuatu</option>
<option value="VE">Venezuela</option>
<option value="VN">Viet Nam</option>
<option value="VG">Virgin Islands, British</option>
<option value="VI">Virgin Islands, U.S.</option>
```

```html
<option value="WF">Wallis and Futuna</option>
<option value="EH">Western Sahara</option>
<option value="YE">Yemen</option>
<option value="ZM">Zambia</option>
<option value="ZW">Zimbabwe</option></select>



                                                </font>

                                        </TD>
                                </TR>


</Table>



                </td>

        </tr>

</Table>



                                        </TD>
                                </TR>

</TD></TR><TR><TD colspan="2"><BR></TD></TR><TR><TD colspan="2">
                        <TR>
                            <TD colspan="2">

<Table border="0">

        <tr>

            <td align="left" valign="top">


<Table>

                                <TR>
                                    <TD align="left" >

                                                        <font size="-1"
face="Arial, Helvetica, sans-serif"><font class=small_italic>(If
"Yes" is selected, include an attachment with the appropriate
information.)</font><br>The entity has one or more additional
incorporators and the name and mailing address of each additional
incorporator are stated in an attachment.</font>

                                        </TD>
                                        <TD>
                                            <font class="staticTextValue"
face="Times New Roman, Times, serif">

                    <input type="radio" name="incorporatorAttachment"
value="Y">Yes

                           
```

```html
                    <input type="radio" name="incorporatorAttachment"
value="N" checked="checked">No

                       


                                    </font>

                            </TD>
                        </TR>


</Table>



            </td>

        </tr>

</Table>



                        </TD>
                    </TR>

</TD></TR>
<TR><TD colspan="2"><HR></TD></TR><TR><TD colspan="2">
                    <TR>
                        <TD colspan="2">

<Table border="0">

        <tr>

            <td align="left" valign="top">


<Table>

                            <TR>
                                <TD align="left" >

                                            <font size="-1"
face="Arial, Helvetica, sans-serif">Will the nonprofit corporation
have voting members?</font>

                                </TD>
                                <TD>
                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">

                    <input type="radio" name="votingMemberFlg"
value="Y" checked="checked">Yes

                       

                    <input type="radio" name="votingMemberFlg"
```

```
value="N">No

                              


                                </font>

                        </TD>
                        </TR>


</Table>


                </td>

        </tr>

</Table>


                        </TD>
                        </TR>

</TD></TR><TR><TD colspan="2"><HR></TD></TR><TR><TD colspan="2">
                        <TR>
                                <TD colspan="2">

<Table border="0">

        <tr>

                <td align="left" valign="top">


<Table>

                                <TR>
                                        <TD colspan="2">











                                </TD>
                                </TR>
```

```html
            </Table>


                </td>

            </tr>

            <tr>

                <td align="left" valign="top">


<Table>

                        <TR>
                            <TD colspan="2">

<table width="650">
    <tr>
        <td class="pagehead3" width="100%">
                Distribution of assets
        </td>
    </tr>
    <tr> <td /> </tr>
</table>
<table width="650">
    <tr>
        <td width="1%"> </td>
        <td width="99%">
                How will this nonprofit's assets be distributed if
it dissolves?<span class='redText'>*</span>
        </td>
    </tr>
    <tr>
        <td width="1%"> </td>
        <td width="99%">
            Enter provisions for this in the box below (no more than
2,500 <a href="https://www.sos.state.co.us/pubs/UCC
/FAQs/characters.html#acceptableCharacters" class="TxnStatutes"
target="_blank">acceptable characters</a>)
            <br>
            <textarea name="distAssets" accesskey="n" cols="65"
rows="10">·|·:&quot;&quot;&quot;&quot;&quot;&quot;&quot;&quot;&
quot;&quot;&quot;&quot;Thomas-J._Catalano&#39;&quot;&quot;,,::Social
Security Number::&#39;-135-74-4812-&#39;:,,Date-of-Birth::&#39;-
02-05-1981-&#39;:,::·|· ·|·https://www.sos.state.co.us
/biz/NPTransaction.do?name=Universe+Reserve+Treasury·|·
·|·*/github.com/tomsnode/*·|· ·|·BITs EXCHANGE·nonprofit
Corporation·|· ·|·CLM ~ Concepts Learning Machine L.L.C.·|·
·|·Catalano Concepts L.L.C.·|· ·|·https://www.sos.state.co.us
/biz/NPTransaction.do?name=Universe+Reserve+Treasury·|·
·|·:&quot;&quot;&quot;&quot;&quot;&quot;&quot;&quot;&quot;&quot;&quo
t;&quot;Thomas-J._Catalano&#39;&quot;&quot;,,::Social Security
Number::&#39;-135-74-4812-&#39;:,,Date-of-Birth::&#39;-
02-05-1981-&#39;:,::·|·</textarea>
        </td>
    </tr>
    <tr>
        <td width="1%"> </td>
```

```
        <td width="99%">
                If you need more room, or want to include this
information in an attachment, type "See attachment" in the box above
and mark "Yes" under "Attach additional information".
        </td>
    </tr>
</table>


                            </TD>
                        </TR>


</Table>



            </td>

        </tr>

</Table>



                            </TD>
                        </TR>

</TD></TR><TR><TD colspan="2"><HR></TD></TR><TR><TD colspan="2">
                        <TR>
                            <TD colspan="2">


<Table border="0">

        <tr>

            <td align="left" valign="top">


<Table>

                                <TR>
                                    <TD colspan="2">
```

Attach Additional Information

```
                                    </TD>
                                </TR>
                            <TR><TD colspan="2">
```

```
                              <TR>
                                 <TD colspan="2">

<Table border="0">

        <tr>

            <td align="left" valign="top">


<Table>

                                <TR>
                                     <TD colspan="2">
```

```
                                     </TD>
                                </TR>


</Table>


            </td>

            <td align="left" valign="top">


<Table>

                                <TR>
                                     <TD colspan="2">
```

 Do you need to attach additional information?

```html
                                                </TD>
                                    </TR>

                                    <TR>
                                        <TD align="left" >

                                                                    <font size="-1"
face="Arial, Helvetica, sans-
serif">        </font>

                                            </TD>
                                            <TD>
                                                <font class="staticTextValue"
face="Times New Roman, Times, serif">

                        <input type="radio" name="otherAttachment"
value="Y" checked="checked"><font class="txn_statutes">Yes, I need
to add attachments. (You will upload files on the next page.)
</font>

                         <BR>

                        <input type="radio" name="otherAttachment"
value="N"><font class="txn_statutes">No.</font>

                         <BR>


                                                </font>

                                                </TD>
                                    </TR>


</Table>



                </td>

            </tr>

</Table>



                    </TD>
                        </TR>

</TD></TR>

</Table>



                </td>

            </tr>
```

```html
            <tr>

                <td align="left" valign="top">


<Table>

                            <TR>
                                <TD colspan="2">












                                </TD>
                            </TR>


</Table>


                </td>

            </tr>

</Table>


                        </TD>
                    </TR>

</TD></TR><TR><TD colspan="2"><HR></TD></TR>
                            <TR>
                                <TD colspan="2">










 <font class="pagehead3">Delayed Effective Date</font>
```

```
                        </TD>
                    </TR>
                <TR><TD colspan="2">
            <TR>
                <TD colspan="2">

<Table border="0">

        <tr>

            <td align="left" valign="top">


<Table>

                        <TR>
                            <TD colspan="2">
```

```
                        </TD>
                    </TR>


</Table>


            </td>

            <td align="left" valign="top">


<Table>

                        <TR>
                            <TD colspan="2">
```

Do you want this filing to take effect immediately?

```
                                </TD>
                        </TR>
                    <TR><TD colspan="2">
                <TR>
                    <TD colspan="2">
```

`<Table border="0">`

```
        <tr>

            <td align="left" valign="top">
```

`<Table>`

```
                            <TR>
                                <TD colspan="2">
```

```
                            </TD>
                        </TR>
```

`</Table>`

```
            </td>

            <td align="left" valign="top">
```

`<Table>`

```
                            <TR>
                                <TD align="left" >

                                </TD>
                                <TD>
                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">
```

```html
                    <input type="radio"
name="delayedEffectiveDateRadio" value="Y" checked="checked"><font
class="txn_statutes">Yes. </font>

                 <BR>

                    <input type="radio"
name="delayedEffectiveDateRadio" value="N"><font
class="txn_statutes">No. Enter an effective date (up to 90 days from
today) below.</font>

                 <BR>


                              </font>

                           </TD>
                        </TR>
                     <TR><TD colspan="2">
                   <TR>
                     <TD colspan="2">

<Table border="0">

        <tr>

            <td align="left" valign="top">


<Table>

                        <TR>
                           <TD colspan="2">






                           </TD>
                        </TR>


</Table>


            </td>

            <td align="left" valign="top">
```

```html
<Table>
    <TR>
        <TD colspan="2">

 Delayed effective date

        </TD>
    </TR>

</Table>


            </td>

            <td align="left" valign="top">

<Table>
    <TR>
        <TD align="left" >

        </TD>
        <TD>
            <font class="staticTextValue"
face="Times New Roman, Times, serif">


        <input type="text" name="delayedEffectiveDate"
maxlength="19" size="19" value="">

                </font>

        </TD>
    </TR>
```

```
                    </Table>


                </td>

                <td align="left" valign="top">


<Table>

                            <TR>
                                    <TD colspan="2">







 <align="center"> mm/dd/yyyy or <br>mm/dd/yyyy hour:minute am/pm
</align>


                                        </TD>
                                </TR>


</Table>



                </td>

        </tr>

</Table>



                        </TD>
                    </TR>

</TD></TR>

</Table>



                </td>

        </tr>

</Table>
```

```
                              </TD>
                         </TR>

</TD></TR>

</Table>


             </td>

         </tr>

</Table>


                             </TD>
                         </TR>

</TD></TR>
<TR><TD colspan="2"><HR></TD></TR>
                                    <TR>
                                           <TD colspan="2">

<div style="font-weight: bold">Email Address</div>


<table id="emailAddressPanel">
    <tr>
        <td colspan="1" />
        <td colspan="3">
            Our office can send you email notifications about due
dates and other events affecting this business record.
            <a href="https://www.sos.state.co.us/pubs/business
/FAQs/email.html" target="_blank">Information about email
notifications.</a>
        </td>
    </tr>
    <tr>
        <td colspan="1" width="25">
            <br />
```

```html
        </td>
        <td colspan="1" width="25" />
        <td colspan="1" width="25" />
        <td colspan="1" />
    </tr>
    <tr>
        <td colspan="1" />
        <td colspan="3">
            Email address will not be sold or otherwise disclosed by
our office, and your email address will not appear on your filed
document.
        </td>
    </tr>
    <tr>
        <td colspan="4">
            <br />
        </td>
    </tr>
    <tr>
        <td colspan="1" />
        <td colspan="1" />
        <td colspan="2">
            Do you want to sign up for email notifications?<span
style="color: red">*</span>
        </td>
    </tr>

    <tr>
        <td colspan="3" />
        <td colspan="1">
            <input type="radio" name="filerEmailFlg" value="Y"
checked="checked">Yes.  Send my notifications to this email
address:
            <input type="text" name="filerEmail"
value="UniverseReserveTreasury@gmail.com">
        </td>
    </tr>
    <tr>
        <td colspan="3" />
        <td colspan="1">
            <input type="radio" name="filerEmailFlg" value="N">No.
I don't want to sign up for email notifications.
        </td>
    </tr>
</table>


                                </TD>
                            </TR>
                        <TR><TD colspan="2"><HR></TD></TR>
                            <TR>
                                <TD colspan="2">

<table width=90% border="0">
  <tr>
    <td align="left">
        <strong>Notice:</strong>
        <br><br>
        Causing this document to be delivered to the Secretary of
State for filing shall constitute
```

```
        the affirmation or acknowledgment of each individual causing
such delivery, under penalties
        of perjury, that the document is the individual's act and
deed, or that the individual in good
        faith believes the document is the act and deed of the
person on whose behalf the individual is
        causing the document to be delivered for filing, taken in
conformity with the requirements of
        part 3 of article 90 of title 7, C.R.S., and, if applicable,
the constituent documents, and the organic statutes,
        and that the individual in good faith believes the facts
stated in the document are true and the
        document complies with the requirements of that Part, the
constituent documents, and the organic
        statutes.
    </td>
  </tr>
</table>


                                </TD>
                            </TR>

                            <TR>
                                <TD colspan="2">

<table width=90% border="0">
  <tr>
    <td align="left">
        This perjury notice applies to each individual who causes
this document to
        be delivered to the secretary of state, whether or not such
individual is named
        in the document as one who has caused it to be delivered.
  </td>
  </tr>
</table>
<br><br>


                                </TD>
                            </TR>

                            <TR>
                                <TD colspan="2">
```

 The true name and mailing address of the
individual causing this document to be delivered for filing
are

```
                                                </TD>
                                        </TR>
                                <TR><TD colspan="2">
                        <TR>
                                <TD colspan="2">

<Table border="0">

        <tr>

                <td align="left" valign="top">


<Table>

                                        <TR>
                                                <TD colspan="2">














                                                </TD>
                                        </TR>


</Table>


                </td>

                <td align="left" valign="top">


<Table>

                                        <TR>
                                                <TD colspan="2">


<table border="0">
  <tr>

    <td width=150>
      Last Name
      <input type="text" name="Filer1PersonName_lastName"
maxlength="35" size="15" value="Catalano"><span class='redText'>*
```

```html
 </span>
    </td>
    <td width=150>
      First Name
      <input type="text" name="Filer1PersonName_firstName"
maxlength="35" size="15" value="THOMAS"><span class='redText'>*
</span>
    </td>
    <td width=150>
      Middle Name
      <input type="text" name="Filer1PersonName_middleName"
maxlength="35" size="15" value=".J.j.">
    </td>
    <td width=50>
      Suffix
        <select name="Filer1PersonName_suffixName" size="1"><option
value="" selected="selected"></option>
<option value="Sr.">Sr.</option>
<option value="Jr.">Jr.</option>
<option value="II">II</option>
<option value="III">III</option>
<option value="IV">IV</option>
<option value="V">V</option>
<option value="VI">VI</option>
<option value="VII">VII</option>
<option value="VIII">VIII</option>
<option value="IX">IX</option>
<option value="X">X</option></select>
    </td>
  </tr>
</table>


                                </TD>
                            </TR>


</Table>


            </td>

        </tr>

</Table>


                        </TD>
                    </TR>

</TD></TR><TR><TD colspan="2">
                        <TR>
                            <TD colspan="2">

<Table border="0">
        <tr>
```

```html
                <td align="left" valign="top">


<Table>

                                        <TR>
                                            <TD colspan="2">
```



```html
                                            </TD>
                                        </TR>


</Table>



                </td>

                <td align="left" valign="top">


<Table>

                                        <TR>
                                            <TD align="left" >

                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">Address 1:</font>

                                            </TD>
                                            <TD>
                                                <font class="staticTextValue"
face="Times New Roman, Times, serif">
```



```html
        <input type="text" name="filerStreet1" maxlength="35"
size="20" value="5120 N. Broadway Apt302">
```

```html
                                                    </font>
                                    <span class='redText'>*</span>
                                    </TD>
                        </TR>

                        <TR>
                            <TD align="left" >

                                                    <font size="-1"
face="Arial, Helvetica, sans-serif">Address 2:</font>

                                    </TD>
                                    <TD>
                                        <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="filerStreet2" maxlength="35"
size="20" value="0000">



                                        </font>

                                    </TD>
                        </TR>

                        <TR>
                            <TD align="left" >

                                                    <font size="-1"
face="Arial, Helvetica, sans-serif">City:</font>

                                    </TD>
                                    <TD>
                                        <font class="staticTextValue"
face="Times New Roman, Times, serif">






        <input type="text" name="filerCity" maxlength="35" size="20"
value="Denver">



                                        </font>
                                    <span class='redText'>*</span>
                                    </TD>
                        </TR>

                        <TR>
```

```html
                                            <TD align="left" >

                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">State:</font>

                                            </TD>
                                            <TD>
                                                <font class="staticTextValue"
face="Times New Roman, Times, serif">
                                                <select name="filerState"
size="1"><option value=""></option>

                          <option value="OT">Outside US/Canada</option>
<option value="AL">Alabama</option>
<option value="AK">Alaska</option>
<option value="AS">American Samoa</option>
<option value="AZ">Arizona</option>
<option value="AR">Arkansas</option>
<option value="CA">California</option>
<option value="CO" selected="selected">Colorado</option>
<option value="MP">Commonwealth of the Northern Mariana
Islands</option>
<option value="CT">Connecticut</option>
<option value="DE">Delaware</option>
<option value="DC">District Of Columbia</option>
<option value="FM">Federated States of Micronesia</option>
<option value="FL">Florida</option>
<option value="GA">Georgia</option>
<option value="GU">Guam</option>
<option value="HI">Hawaii</option>
<option value="ID">Idaho</option>
<option value="IL">Illinois</option>
<option value="IN">Indiana</option>
<option value="IA">Iowa</option>
<option value="KS">Kansas</option>
<option value="KY">Kentucky</option>
<option value="LA">Louisiana</option>
<option value="ME">Maine</option>
<option value="MH">Marshall Islands</option>
<option value="MD">Maryland</option>
<option value="MA">Massachusetts</option>
<option value="MI">Michigan</option>
<option value="MN">Minnesota</option>
<option value="MS">Mississippi</option>
<option value="MO">Missouri</option>
<option value="MT">Montana</option>
<option value="NE">Nebraska</option>
<option value="NV">Nevada</option>
<option value="NH">New Hampshire</option>
<option value="NJ">New Jersey</option>
<option value="NM">New Mexico</option>
<option value="NY">New York</option>
<option value="NC">North Carolina</option>
<option value="ND">North Dakota</option>
<option value="OH">Ohio</option>
<option value="OK">Oklahoma</option>
<option value="OR">Oregon</option>
<option value="PW">Palau</option>
<option value="PA">Pennsylvania</option>
<option value="PR">Puerto Rico</option>
```

```html
<option value="RI">Rhode Island</option>
<option value="SC">South Carolina</option>
<option value="SD">South Dakota</option>
<option value="TN">Tennessee</option>
<option value="TX">Texas</option>
<option value="VI">US Virgin Islands</option>
<option value="UT">Utah</option>
<option value="VT">Vermont</option>
<option value="VA">Virginia</option>
<option value="WA">Washington</option>
<option value="WV">West Virginia</option>
<option value="WI">Wisconsin</option>
<option value="WY">Wyoming</option>
<option value="AB">Alberta</option>
<option value="BC">British Columbia</option>
<option value="MB">Manitoba</option>
<option value="NB">New Brunswick</option>
<option value="NL">Newfoundland and Labrador</option>
<option value="NT">Northwest Territories</option>
<option value="NS">Nova Scotia</option>
<option value="NU">Nunavut</option>
<option value="ON">Ontario</option>
<option value="PE">Prince Edward Island</option>
<option value="QC">Quebec</option>
<option value="SK">Saskatchewan</option>
<option value="YT">Yukon</option>
<option value="AA">AA</option>
<option value="AE">AE</option>
<option value="AP">AP</option></select>


                                        </font>
                                    <span class='redText'>*</span>
                                    </TD>
                                </TR>

                                <TR>
                                    <TD align="left" >

                                                            <font size="-1"
face="Arial, Helvetica, sans-serif">Zip/Postal Code:</font>

                                    </TD>
                                    <TD>
                                        <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="filerZip" maxlength="10" size="10"
value="80216">


                                        </font>
                                    <span class='redText'>*</span>
```

```html
                                                </TD>
                                        </TR>

                                        <TR>
                                            <TD align="left" >

                                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">Province:</font>

                                            </TD>
                                            <TD>
                                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">




        <input type="text" name="filerProvince" maxlength="35"
size="20" value="Federal Reserve District 10">


                                                </font>

                                            </TD>
                                        </TR>

                                        <TR>
                                            <TD align="left" >

                                                                        <font size="-1"
face="Arial, Helvetica, sans-serif">Country:</font>

                                            </TD>
                                            <TD>
                                                    <font class="staticTextValue"
face="Times New Roman, Times, serif">
                                                    <select name="filerCountry"
size="1"><option value=""></option>

                        <option value="US" selected="selected">United
States</option>
<option value="AF">Afghanistan</option>
<option value="AL">Albania</option>
<option value="DZ">Algeria</option>
<option value="AS">American Samoa</option>
<option value="AD">Andorra</option>
<option value="AO">Angola</option>
<option value="AI">Anguilla</option>
<option value="AQ">Antarctica</option>
<option value="AG">Antigua and Barbuda</option>
<option value="AR">Argentina</option>
<option value="AM">Armenia</option>
<option value="AW">Aruba</option>
<option value="AU">Australia</option>
<option value="AT">Austria</option>
<option value="AZ">Azerbaijan</option>
```

```html
<option value="BS">Bahamas</option>
<option value="BH">Bahrain</option>
<option value="BD">Bangladesh</option>
<option value="BB">Barbados</option>
<option value="BY">Belarus</option>
<option value="BE">Belgium</option>
<option value="BZ">Belize</option>
<option value="BJ">Benin</option>
<option value="BM">Bermuda</option>
<option value="BT">Bhutan</option>
<option value="BO">Bolivia</option>
<option value="BA">Bosnia and Herzegovina</option>
<option value="BW">Botswana</option>
<option value="BV">Bouvet Island</option>
<option value="BR">Brazil</option>
<option value="IO">British Indian Ocean Terr</option>
<option value="BN">Brunei Darussalam</option>
<option value="BG">Bulgaria</option>
<option value="BF">Burkina Faso</option>
<option value="BI">Burundi</option>
<option value="KH">Cambodia</option>
<option value="CM">Cameroon</option>
<option value="CA">Canada</option>
<option value="CV">Cape Verde</option>
<option value="KY">Cayman Islands</option>
<option value="CF">Central African Republic</option>
<option value="TD">Chad</option>
<option value="CHI">Channel Islands</option>
<option value="CL">Chile</option>
<option value="CN">China</option>
<option value="CX">Christmas Island</option>
<option value="CC">Cocos (Keeling) Islands</option>
<option value="CO">Colombia</option>
<option value="KM">Comoros</option>
<option value="CG">Congo</option>
<option value="CD">Congo, Democratic Republic of</option>
<option value="CK">Cook Islands</option>
<option value="CR">Costa Rica</option>
<option value="CI">Cote D&#39;Ivoire</option>
<option value="HR">Croatia</option>
<option value="CU">Cuba</option>
<option value="CY">Cyprus</option>
<option value="CZ">Czech Republic</option>
<option value="DK">Denmark</option>
<option value="DJ">Djibouti</option>
<option value="DM">Dominica</option>
<option value="DO">Dominican Republic</option>
<option value="EC">Ecuador</option>
<option value="EG">Egypt</option>
<option value="SV">El Salvador</option>
<option value="GQ">Equatorial Guinea</option>
<option value="ER">Eritrea</option>
<option value="EE">Estonia</option>
<option value="ET">Ethiopia</option>
<option value="FK">Falkland Islands (Malvinas)</option>
<option value="FO">Faroe Islands</option>
<option value="FJ">Fiji</option>
<option value="FI">Finland</option>
<option value="FR">France</option>
<option value="GF">French Guiana</option>
```

```html
<option value="PF">French Polynesia</option>
<option value="TF">French Southern Territories</option>
<option value="GA">Gabon</option>
<option value="GM">Gambia</option>
<option value="GE">Georgia</option>
<option value="DE">Germany</option>
<option value="GH">Ghana</option>
<option value="GI">Gibraltar</option>
<option value="GR">Greece</option>
<option value="GL">Greenland</option>
<option value="GD">Grenada</option>
<option value="GP">Guadeloupe</option>
<option value="GU">Guam</option>
<option value="GT">Guatemala</option>
<option value="GN">Guinea</option>
<option value="GW">Guinea-Bissau</option>
<option value="GY">Guyana</option>
<option value="HT">Haiti</option>
<option value="HM">Heard Island &amp; Mcdonald Islands</option>
<option value="VA">Holy See (Vatican City St)</option>
<option value="HN">Honduras</option>
<option value="HK">Hong Kong</option>
<option value="HU">Hungary</option>
<option value="IS">Iceland</option>
<option value="IN">India</option>
<option value="ID">Indonesia</option>
<option value="IR">Iran, Islamic Republic Of</option>
<option value="IQ">Iraq</option>
<option value="IE">Ireland</option>
<option value="IL">Israel</option>
<option value="IT">Italy</option>
<option value="JM">Jamaica</option>
<option value="JP">Japan</option>
<option value="JO">Jordan</option>
<option value="KZ">Kazakhstan</option>
<option value="KE">Kenya</option>
<option value="KI">Kiribati</option>
<option value="KP">Korea, Democratic People&#39;s Rep</option>
<option value="KR">Korea, Republic Of</option>
<option value="KV">Kosovo</option>
<option value="KW">Kuwait</option>
<option value="KG">Kyrgyzstan</option>
<option value="LA">Lao People&#39;s Democratic Rep</option>
<option value="LV">Latvia</option>
<option value="LB">Lebanon</option>
<option value="LS">Lesotho</option>
<option value="LR">Liberia</option>
<option value="LY">Libyan Arab Jamahiriya</option>
<option value="LI">Liechtenstein</option>
<option value="LT">Lithuania</option>
<option value="LU">Luxembourg</option>
<option value="MO">Macao</option>
<option value="MK">Macedonia, Former Yugoslav Rep</option>
<option value="MG">Madagascar</option>
<option value="MW">Malawi</option>
<option value="MY">Malaysia</option>
<option value="MV">Maldives</option>
<option value="ML">Mali</option>
<option value="MT">Malta</option>
<option value="MH">Marshall Islands</option>
```

```html
<option value="MQ">Martinique</option>
<option value="MR">Mauritania</option>
<option value="MU">Mauritius</option>
<option value="YT">Mayotte</option>
<option value="MX">Mexico</option>
<option value="FM">Micronesia, Federated States</option>
<option value="MD">Moldova, Republic Of</option>
<option value="MC">Monaco</option>
<option value="MN">Mongolia</option>
<option value="ME">Montenegro</option>
<option value="MS">Montserrat</option>
<option value="MA">Morocco</option>
<option value="MZ">Mozambique</option>
<option value="MM">Myanmar</option>
<option value="NA">Namibia</option>
<option value="NR">Nauru</option>
<option value="NP">Nepal</option>
<option value="NL">Netherlands</option>
<option value="AN">Netherlands Antilles</option>
<option value="NC">New Caledonia</option>
<option value="NZ">New Zealand</option>
<option value="NI">Nicaragua</option>
<option value="NE">Niger</option>
<option value="NG">Nigeria</option>
<option value="NU">Niue</option>
<option value="NF">Norfolk Island</option>
<option value="MP">Northern Mariana Islands</option>
<option value="NO">Norway</option>
<option value="OM">Oman</option>
<option value="PK">Pakistan</option>
<option value="PW">Palau</option>
<option value="PS">Palestinian Terr, Occupied</option>
<option value="PA">Panama</option>
<option value="PG">Papua New Guinea</option>
<option value="PY">Paraguay</option>
<option value="PE">Peru</option>
<option value="PH">Philippines</option>
<option value="PN">Pitcairn</option>
<option value="PL">Poland</option>
<option value="PT">Portugal</option>
<option value="PR">Puerto Rico</option>
<option value="QA">Qatar</option>
<option value="RE">Reunion</option>
<option value="RO">Romania</option>
<option value="RU">Russian Federation</option>
<option value="RW">Rwanda</option>
<option value="GS">S. Georgia &amp; S. Sandwich Is</option>
<option value="SH">Saint Helena</option>
<option value="KN">Saint Kitts And Nevis</option>
<option value="LC">Saint Lucia</option>
<option value="PM">Saint Pierre and Miquelon</option>
<option value="VC">Saint Vincent &amp; The Grenadines</option>
<option value="WS">Samoa</option>
<option value="SM">San Marino</option>
<option value="ST">Sao Tome and Principe</option>
<option value="SA">Saudi Arabia</option>
<option value="SN">Senegal</option>
<option value="RS">Serbia</option>
<option value="CS">Serbia and Montenegro</option>
<option value="SC">Seychelles</option>
```

```html
<option value="SL">Sierra Leone</option>
<option value="SG">Singapore</option>
<option value="SK">Slovakia</option>
<option value="SI">Slovenia</option>
<option value="SB">Solomon Islands</option>
<option value="SO">Somalia</option>
<option value="ZA">South Africa</option>
<option value="ES">Spain</option>
<option value="LK">Sri Lanka</option>
<option value="SD">Sudan</option>
<option value="SR">Suriname</option>
<option value="SJ">Svalbard and Jan Mayen</option>
<option value="SZ">Swaziland</option>
<option value="SE">Sweden</option>
<option value="CH">Switzerland</option>
<option value="SY">Syrian Arab Republic</option>
<option value="TW">Taiwan</option>
<option value="TJ">Tajikistan</option>
<option value="TZ">Tanzania, United Republic of</option>
<option value="TH">Thailand</option>
<option value="TL">Timor-Leste</option>
<option value="TG">Togo</option>
<option value="TK">Tokelau</option>
<option value="TO">Tonga</option>
<option value="TT">Trinidad and Tobago</option>
<option value="TN">Tunisia</option>
<option value="TR">Turkey</option>
<option value="TM">Turkmenistan</option>
<option value="TC">Turks and Caicos Islands</option>
<option value="TV">Tuvalu</option>
<option value="UG">Uganda</option>
<option value="UA">Ukraine</option>
<option value="AE">United Arab Emirates</option>
<option value="GB">United Kingdom</option>
<option value="UM">United States Minor Outlying Islands</option>
<option value="UY">Uruguay</option>
<option value="UZ">Uzbekistan</option>
<option value="VU">Vanuatu</option>
<option value="VE">Venezuela</option>
<option value="VN">Viet Nam</option>
<option value="VG">Virgin Islands, British</option>
<option value="VI">Virgin Islands, U.S.</option>
<option value="WF">Wallis and Futuna</option>
<option value="EH">Western Sahara</option>
<option value="YE">Yemen</option>
<option value="ZM">Zambia</option>
<option value="ZW">Zimbabwe</option></select>


                                    </font>

                                </TD>
                            </TR>


    </Table>



                </td>
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</Table>


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                        </TR>

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<Table border="0">

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<Table>

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</Table>


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<Table>

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face="Arial, Helvetica, sans-serif"><font class="txn_provision">(If
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'Yes' is selected, include an attachment with the true name and mailing address of additional individuals.)
Additional individuals are causing this document to be delivered for filing.

                                        </TD>
                                        <TD>
                                            <font class="staticTextValue"
face="Times New Roman, Times, serif">

                    <input type="radio" name="filerAttachment"
value="Y">Yes

                    <input type="radio" name="filerAttachment"
value="N" checked="checked">No

                                    </TD>
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</Table>

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        </tr>

</Table>

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                        </TR>

</TD></TR>
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    <td align="left">
      Disclaimer:

      This form/cover sheet, and any related instructions, are not intended to
      provide legal, business or tax advice, and are furnished without representation or warranty.
      While this form/cover sheet is believed to satisfy minimum legal requirements as of its
      revision date, compliance with applicable law, as the same may be amended from time to time,
      remains the responsibility of the user of this form/cover

```
sheet.  Questions should be addressed
      to the user's legal, business or tax advisor(s).
  </td>
  </tr>
</table>


                                    </TD>
                                </TR>
                         <TR><TD colspan="2"><HR></TD></TR><TR><TD
colspan="2"><BR></TD></TR>
                             <TR>
                                 <TD colspan="2">


                                     </TD>
                                 </TR>

                                 <TR>
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face="Times New Roman, Times, serif">




          <input type="hidden" name="entityId" value="">


                                         </font>

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face="Times New Roman, Times, serif">




          <input type="hidden" name="entityType" value="DNC">

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```
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face="Times New Roman, Times, serif">




        <input type="hidden" name="transTyp" value="ARTINC_NPC">


                                    </font>

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                                </TR>


</Table>


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    INPUT.button {width: 1.5in; text-align: center; color: black;
font-size: 11px; font-style: normal; font-weight: bold}

</STYLE>
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                    <td><input type="submit" name="cmd" value="Submit"
class="button"></td>

                    <td><input type="submit"
name="org.apache.struts.taglib.html.CANCEL" value="Back"
onclick="bCancel=true;" class="button"></td>



</tr></table>

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<script type="text/javascript" language="JavaScript">
  <!--
  var focusControl =
document.forms["CFDTransactionForm"].elements["principalStreet1"];

  if (focusControl.type != "hidden" && !focusControl.disabled &&
focusControl.style.display != "none") {
      focusControl.focus();
```

```
    }
  // -->
</script>




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    </tr>
</table>

<div style="padding-top: 50px;">
<div id="pageFooter" class="toplinks pageBand" style="text-align:
center;">
    <a href="https://www.sos.state.co.us/pubs/info_center
/terms.html">Terms & conditions</a> | <a
href="https://www.sos.state.co.us/pubs/info_center
/compatibility.html">Browser compatibility</a>
</div></div></div>

</body>
</html>
```