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Colorado Secretary of State

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## **Articles of Organization**

filed pursuant to § 7-80-203 and § 7-80-204 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name of the limited liability company is

## App Fusion, LLC

(The name of a limited liability company must contain the term or abbreviation "limited liability company", "ltd. liability company", "limited liability co.", "ltd. liability co.", "limited", "l.l.c.", "llc", or "ltd.". See §7-90-601, C.R.S.)

(Street number and name)

(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)

10400 Tracewood court

2. The principal office address of the limited liability company's initial principal office is

	highlands ranch	CO	80130	
	(City)	<del>(State)</del> United S		)
	(Province – if applicable)	(Countr		
Mailing address (leave blank if same as street address)	(Street number and	l name or Post Office .	Box information)	
	(City) (State)		(ZIP/Postal Code)	
	(Province – if applicable)	(Country	· · · · · · · · · · · · · · · · · · ·	
3. The registered agent name and regist agent are	tered agent address of the lin	nica naomity con	ipany's initial legist	ered
agent are  Name	·	·	ipany's initial regist	ered
agent are  Name  (if an individual)	Sullivan (Last)	Ryan (First)		
agent are  Name	Sullivan	Ryan		
agent are  Name  (if an individual)	Sullivan (Last)	Ryan		(Suffix)
agent are  Name (if an individual)  or  (if an entity) (Caution: Do not provide both an individual)	Sullivan (Last)	Ryan (First)		
agent are  Name (if an individual)  or (if an entity)	Sullivan (Last) ividual and an entity name.) 10400 Tracewood of	Ryan (First)	(Middle)	
Name (if an individual)  or  (if an entity) (Caution: Do not provide both an indi	Sullivan  (Last)  ividual and an entity name.)  10400 Tracewood (Str	Ryan (First)  Court eet number and name	(Middle)	
agent are  Name (if an individual)  or  (if an entity) (Caution: Do not provide both an individual)	Sullivan (Last) ividual and an entity name.) 10400 Tracewood of	Ryan (First)	(Middle)	

		CO		
	(City)	(State)	(ZIP Code)	
(The following statement is adopted by more The person appointed as regions)	gistered agent has consented	to being so appointe	ed.	
4. The true name and mailing addr	ess of the person forming the	limited liability cor	npany are	
Name (if an individual)	Sullivan	Ryan		
or	(Last)	(First)	(Middle)	(Suffix)
(if an entity) (Caution: Do not provide both ar	n individual and an entity name.)			
	10400 Tracewoo	od court		
Mailing address		nber and name or Post Of	fice Box information)	
	highlands ranch	СО	80130	
	(City)	United S	(ZIP/Postal Co	de)
	(Province – if applica		<del></del> '	
	pany has one or more additio nd mailing address of each su liability company is vested in	ich person are state		y
_				
5. (The following statement is adopted by ma  There is at least one member	rking the box.) r of the limited liability comp	any.		
7. (If the following statement applies, adopt t  This document contains add	the statement by marking the box and itional information as provide			
3. (Caution: Leave blank if the document significant legal consequences. Read			ed effective date has	
(If the following statement applies, adopt The delayed effective date and,			ne required format.)	
	11		n/dd/yyyy hour:minute ar	n/pm)

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

	Sullivan	Ryan				
	10400 Tracewood cou	(First)	(Middle)	(Suffix)		
	(Street number and name or Post Office Box information)					
	highlands ranch	СО	80130			
	(City)	(State) United Sta	(ZIP/Postal Co	ode)		
	(Province – if applicable)	(Country)				
(If the following statement applies, adopt  This document contains the true causing the document to be deli	e name and mailing address of		•	ls		

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