



Colorado Secretary of State
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Annual Report

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ID number: 20061030740

Entity name: At Your Home or At Our Home, Inc.

Jurisdiction under the law of which the
entity was formed or registered: Colorado

You must complete line 1.

Notice:

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., 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.

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1. Name(s) and address(es) of the
individual(s) causing the document
to be delivered for filing:

<u>Samson</u>	<u>Jerrilyn</u>	<u>Sue</u>	
(Last)	(First)	(Middle)	(Suffix)
<u>1007 Emory Cir</u>			
(Street name and number or Post Office Box information)			
<u>Colorado Springs</u>	<u>CO</u>	<u>80915</u>	
(City)	(State)	(Postal/Zip Code)	
<u></u>		<u></u>	
(Province – if applicable)		(Country – if not US)	

(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark this box ☐ and include an attachment stating the name and address of such individuals.)

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OR complete Questions 2 through 7.

2. Principal office street address: 1007 Emory Cir
(Street name and number)

Colorado Springs CO 80915
(City) (State) (Postal/Zip Code)

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

3. Principal office mailing address:
(if different from above)

(Street name and number or Post Office Box information)

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

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

4. Registered agent name: (if an individual) Samson Jerrilyn Sue
(Last) (First) (Middle) (Suffix)

OR (if a business organization)

5. The person identified above as registered agent has consented to being so appointed.

6. Registered agent street address: 1007 Emory Cir
(Street name and number)

Colorado Springs CO 80915
(City) (State) (Postal/Zip Code)

7. Registered agent mailing address:
(if different from above)

(Street name and number or Post Office Box information)

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

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

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