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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	domostia	antitra		of the	limitad	liobility		
1.	THE	domestic	enuty	name	or the	mmieu	паоши	Compan	ly 18

Columbus Properties, 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.)

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

PO Box 350115

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

	(Street number and name)				
	Westminster	СО	CO 80035		
	(City)	United St		ode)	
	(Province – if applicable)	(Country)		
Mailing address					
(leave blank if same as street address)	(Street number and name or Post Office Box information)				
	(City)	(State)	(ZIP/Postal C	'ode)	
e registered agent name and registe ent are	(Province – if applicable) red agent address of the limi	(Country)		gistered	
	red agent address of the limi	, , ,		gistered	
ent are Name	red agent address of the limi	ted liability comp			
Name (if an individual)	Ditoro (Last)	ted liability comp	pany's initial reg		
Name (if an individual) OR (if an entity)	Ditoro (Last)	ted liability comp	pany's initial reg		
Name (if an individual) OR (if an entity) (Caution: Do not provide both an indiv	Ditoro (Last) idual and an entity name.) PO Box 350115	ted liability comp	pany's initial reg		
Name (if an individual) OR (if an entity) (Caution: Do not provide both an indiv	Ditoro (Last) idual and an entity name.) PO Box 350115	Lawrence (First)	pany's initial reg		

Mailing address (leave blank if same as street address)	(Street number and name or Post Office Box information)						
	(City)	CO (State)	(ZIP Code)				
(The following statement is adopted by marking the The person appointed as registered		being so appointe	ed.				
4. The true name and mailing address of t	the person forming the l	imited liability con	npany are				
Name (if an individual)	Ditoro	Lawrence					
OR	(Last)	(First)	(Middle)	(Suffix)			
(if an entity) (Caution: Do not provide both an individ	dual and an entity name.)						
Mailing address	PO Box 350115						
	(Street number and name or Post Office Box information)						
	Westminster	СО	80035				
	(City)	United S	States (ZIP/Postal C	ode)			
	(Province – if applicab	ble) (Countr	y)				
 (If the following statement applies, adopt is a company and the name and main the name and main the management of the limited liability (Mark the applicable box.) ✓ one or more managers. OR the members. 	as one or more addition iling address of each suc	al persons forming	the limited liabili				
6. (The following statement is adopted by marking the There is at least one member of the		uny.					
7. (If the following statement applies, adopt the statem This document contains additional							
8. (Caution: <u>Leave blank</u> if the document does significant legal consequences. Read instruc			ed effective date has				
(If the following statement applies, adopt the states.) The delayed effective date and, if appli		ment is/are	ne required format.) n/dd/yyyy hour:minute o	 um/pm)			

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Ditoro	Lawrence		Ш			
PO Box (<i>Last</i>)	(First)	(Middle)	(Suffix)			
(Street nu	(Street number and name or Post Office Box information)					
Westminster	СО	80035				
(City)	United St	ates (ZIP/Postal Co	ode)			
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