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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

Document must be filed electronically.

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are subject to change.

I Bella Transportation

(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.)

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

Street address	4615 Sandstone Dr		
	(Street n	number and name)	
	Monument	CO 80132	
	(City)	United States (ZIP/Postal Code)	
	(Province – if applicable)	(Country)	
<u>Aailing</u> address eave blank if same as street address)	(Street number and name or Post Office Box information)		
	(City)	(State) (ZIP/Postal Code)	
	(Province – if applicable)	(Country)	

3. The registered agent name and registered agent address of the limited liability company's initial registered agent are

Name	
------	--

(Last) nd an entity name.)	(First)	(Middle)	(Suffix)
ıd an entity name.)			
15 Sandstone			
((Street number and name))	
onument (City)	<u>CO</u> (State)	Colorado (ZIP Code)	
	onument	(Street number and name)	(Street number and name)

<u>Mailing</u> address (leave blank if same as street address)	(Street number and name or Post Office Box information)			
		СО		
	(City)	(State)	(ZIP Code)	
(<i>The following statement is adopted by marking the box.</i> I The person appointed as registered age		ng so appointed.		
The true name and mailing address of the pe	erson forming the limite	ed liability compa	ny are	

Name (if an individual)	Colodny	L	Robert	
OR	(Last)	(First)	(Middle)	(Suffix)
(if an entity) (<i>Caution: Do not provide both a</i>	n individual and an entity name.)			
Mailing address	4615 Sandstone			
	(Street number of	and name or Post Off	ice Box information)	
	Monument	CO	80132	
	(City)	United S	tates (ZIP/Postal Co	ode)
	(Province – if applicable)	(Countr	y)	

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

The limited liability company has one or more additional persons forming the limited liability company and the name and mailing address of each such person are stated in an attachment.

5. The management of the limited liability company is vested in *(Mark the applicable box.)*

one or more managers.

OR

4.

 \checkmark the members.

6. (The following statement is adopted by marking the box.)

✓ There is at least one member of the limited liability company.

7. (If the following statement applies, adopt the statement by marking the box and include an attachment.)

This document contains additional information as provided by law.

8. (*Caution: Leave blank* if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.) The delayed effective date and, if applicable, time of this document is/are

(mm/dd/yyyy hour:minute am/pm)

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

Colodny	L	Robert	
4615 Sandstone dr	(First)	(Middle)	(Suffix)
(Street number d	and name or Post Offi	ce Box information)	
M	00	00400	
Monument	CO	80132	
(City)	United St		ode)

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

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