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Colorado Secretary of State

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Articles of Incorporation for a Profit Corporation

filed pursuant to § 7-102-101 and § 7-102-102 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name for the corporation is

Street address

FABRIC IMAGE INC.

7856 W. MANSFIELD PARKWAY

(The name of a corporation must contain the term or abbreviation "corporation", "incorporated", "company", "limited", "corp.", inc.", "co." or "ltd.". See §7-90-601, C.R.S. If the corporation is a professional or special purpose corporation, other law may apply.)

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

2. The principal office address of the corporation's initial principal office is

	BLD # 5 UNIT 108 (Street number and name)			
	LAKEWOOD	CO	80235	
	(City)	United S	tates (ZIP/Postal Code)	
	(Province – if applicable)	(Countr	y)	
Mailing address (leave blank if same as street address)	(5)	Design Office	Providence (Company)	
(leave blank it same as street address)	(Street number and	name or Post Office I	вох information) 	
	(City)	(State)	(ZIP/Postal Code)	
ne registered agent name and register	(Province – if applicable) red agent address of the cor	(Countr		
ne registered agent name and register Name (if an individual)	ABEYTA	poration's initial	registered agent are	
Name	red agent address of the cor	poration's initial	registered agent are	
Name (if an individual)	ABEYTA (Last)	poration's initial	registered agent are	
Name (if an individual) OR (if an entity)	ABEYTA (Last) dual and an entity name.) 7856 W. MANSFIEL	JOSEPH (First) D PARKWA	registered agent are (Middle) (Si	
Name (if an individual) OR (if an entity) (Caution: Do not provide both an individual)	ABEYTA (Last) dual and an entity name.)	JOSEPH (First) D PARKWA	registered agent are (Middle) (Si	
Name (if an individual) OR (if an entity) (Caution: Do not provide both an individual)	ABEYTA (Last) dual and an entity name.) 7856 W. MANSFIEL	JOSEPH (First) D PARKWA	registered agent are (Middle) (Si	

Mailing address (leave blank if same as street address)	(Street number and name or Post Office Box information)				
		CO	_CO		
	(City)	(State)	(ZIP/Postal Code)		
(The following statement is adopted by marking the The person appointed as registered		ented to being so ap	ppointed.		
4. The true name and mailing address of	the incorporator are				
Name		IOOEDII			
(if an individual)	ABEYTA (Last)	JOSEPH (First)	(Middle) (Suffix)		
OR	(Last)	(First)	(мише) (зидіх)		
(if an entity) (Caution: Do not provide both an indivi	idual and an entity name.)				
Mailing address	7856 W. MANSFIELD PARKWAY				
•	BLD # 5 UNIT 1	er and name or Post Offic 08	re Box information)		
	LAKEWOOD	CO	80235		
	(City)	United	States (ZIP/Postal Code)		
	(Province – if applica	able) (Count	try)		
 (If the following statement applies, adopt □ The corporation has one or more additional incorporator are stated. 5. The classes of shares and number of shares follows. (If the following statement applies, adoption is authorized to rights and are entitled to receive the state of the following statement applies.) 	re additional incorporated in an attachment. nares of each class that the statement by marking the to issue 1,000,000 cove the net assets of the	tors and the name at the corporation is a top to box and enter the number common shares that corporation upon dis	authorized to issue are as er of shares.) shall have unlimited voting issolution.		
(If the following statement applies, adop. Additional information regarding attachment. (Caution: At least one box must be marked)	ng shares as required b	y section 7-106-101			
6. (If the following statement applies, adopt the states	ment by marking the box and	include an attachment.)			
☐ This document contains additional	information as provid	ed by law.			
7. (Caution: <u>Leave blank</u> if the document does significant legal consequences. Read instruc			yed effective date has		
(If the following statement applies, adopt the state The delayed effective date and, if applied the state of		cument is/are	he required format.) m/dd/yyyy hour:minute am/pm)		

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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.

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

ABEYTA	JOSEPH		
7856 W. MANSFIEL	D PARKWAY	(Middle)	(Suffix
BLD # 5 UNIT 108	and name or Post Office	Box information)	
LAKEWOOD	CO8	30235	
(City)	United Stat	(ZIP/Postal Code	e)
(Province – if applicable)	(Country)		
pt the statement by marking the box and ue name and mailing address o		tional individuals	8

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