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## **Statement of Change Changing the Principal Office Address**

filed pursuant to § 7-90-305.5 and § 7-90-705 of the Colorado Revised Statutes (C.R.S.)

| 1. The entity ID number and the entity name  | me, or, if the entity does not h     | ave an entity                       | name, the true name are          |  |
|--|--------------------------------------|-------------------------------------|----------------------------------|--|
| Entity ID number   | 20131112573                          |                                     |                                  |  |
| Enacy ID manager   | (Colorado Secretary of State ID numb | ber)                                |                                  |  |
| Entity name or True name   | Lead Relay, LLC                      |                                     |                                  |  |
| 2. The entity's principal office address has   | s changed.                           |                                     |                                  |  |
| Such address, as changed, is   |                                      |                                     |                                  |  |
| Street address   | 4845 Pearl East Circle, Suite 101    |                                     |                                  |  |
| Succe address  | (Street n                            | umber and name)                     |                                  |  |
|  | Boulder                              | CO                                  | 80301                            |  |
|  | (City)                               | — — (State)<br>United S             | (ZIP/Postal Code)                |  |
|  | (Province – if applicable)           | (Country)                           |                                  |  |
| Mailing address  |                                      |                                     |                                  |  |
| (leave blank if same as street address)  | (Street number and nan               | ame or Post Office Box information) |                                  |  |
|  | (City)                               | (State)                             | (ZIP/Postal Code)                |  |
|  | (Province – if applicable)           | (Country                            | ·                                |  |
| 3. (If applicable, adopt the following statement by man  This document contains additional in  |                                      |                                     |                                  |  |
| 4. (Caution: Leave blank if the document does n legal consequences. Read instructions before   |                                      | Stating a delaye                    | d effective date has significant |  |
| (If the following statement applies, adopt the staten<br>The delayed effective date and, if appli  |                                      |                                     | required format.)                |  |
| , 11   | ,                                    |                                     | /dd/yyyy hour:minute am/pm)      |  |
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|   | Biesendorfer                | Suzanne                 |                        |          |
|---|-----------------------------|-------------------------|------------------------|----------|
|   | Berg Hill Greenleaf         |                         |                        | (Suffix) |
|   | 1712 Pearl Street number of | and name or Post Office | e Box information)     |          |
|   | Boulder                     | CO                      | 80302                  |          |
|   | (City)                      | United Sta              | ates (ZIP/Postal Code) | 1        |
|   | (Province – if applicable)  | (Country)               |                        |          |
| oplicable, adopt the following statement is document contains the true na |                             | ,                       | litional individuals   |          |

(If app

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