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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

CDA SERVICES 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.)

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

Street address

96 OAKLAND ST APT 1317

(Street number and name) AURORA CO (City) (State)

<u>CO</u> 80012 <u>(State)</u> (ZIP/Postal Code) <u>(Country)</u>

(Province - if applicable)

Mailing address

(leave blank if same as street address)

96 OAKLAND ST APT 1317

(Street number and name or Post Office Box information)

AURORA	CO 80012
(City)	United States (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 (if an individual)	MARTINEZ MARTIN	CLEMENTE			
or	(Last)	(First)	(Middle)	(Suffix)	
(if an entity)					
(Caution: Do not provide both an individ	dual and an entity name.)				
Street address	96 OAKLAND ST APT 1317				
	(Street number and name)				
	AURORA	СО	80012		
	(City)	(State)	(ZIP Code)		
Mailing address	96 OAKLAND ST A	APT 1317			
(leave blank if same as street address)	(Street number and	d name or Post Office I	Box information)		

• •

	AURORA		CO	80012			
	(City)	(5	State)	(ZIP Code)			
(<i>The following statement is adopted by mark</i> I The person appointed as regis		eing so app	ointeo	d.			
The true name and mailing address	of the person forming the lim	ited liability	y com	apany are			
Name (if an individual)	MARTINEZ MARTIN	CLEME	NTE				
or	(Last)	(First))	(Middle) (Suffix)			
(if an entity) (Caution: Do not provide both an in	dividual and an entity name.)						
Mailing address	96 OAKLAND ST A	APT 1317					
	(Street number	(Street number and name or Post Office Box information)					
	AURORA	C	0	80012			
	(City)	Unit	$\frac{1}{tate}$	(ZIP/Postal Code)			
	(Province – if applicable)		Country	•			
The limited liability compar	dopt the statement by marking the box of ny has one or more additional mailing address of each such bility company is vested in	persons for	ming	the limited liability			
one or more managers.							
or \checkmark the members.							
The following statement is adopted by marking There is at least one member o		Ι.					
(If the following statement applies, adopt the	statement by marking the box and inclu	de an attachme	nt.)				
This document contains addition	onal information as provided b	oy law.					
(Caution: Leave blank if the document of significant legal consequences. Read in.		tte. Stating a	delaye	ed effective date has			
(If the following statement applies, adopt the The delayed effective date and, if			1/06				

Notice:

4.

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8.

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.

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.

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

MARTINEZ MARTIN	CLEMENTE		
96 OAKLAND ST APT	(First) 1317	(Middle)	(Suffix)
(Street number a	nd name or Post Offi	ce Box information)	
AURORA	CO	80012	
(City)	United State)	(ZIP/Postal C	'ode)
(Province – if applicable)	(Country		

(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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