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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

## JPA Holding Company, 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

## 3645 Muskrat Creek Dr.

	(Street number and name)		
	Fort Collins	CO 8	0528
	(City)	United Sta	(ZIP/Postal Code)
	(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 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)	Pietrangelo	James		
×	(Last)	(First)	(Middle)	(Suffix)
or				
(if an entity)				
(Caution: Do not provide both an individ	dual and an entity name.)			
Street address	3645 Muskrat C	reek Dr.		
		(Street number and name)		
	Fort Collins	СО	80528	
	(City)	(State)	(ZIP Code)	
Mailing address				
(leave blank if same as street address)	(Street number and name or Post Office Box information)			

	CO		
(City)	(State)	(ZIP Code)	

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

 $\checkmark$  The person appointed as registered agent has consented to being so appointed.

4. The true name and mailing address of the person forming the limited liability company are

Name (if an individual)	Pietrangelo	James		
(If all individual)	(Last)	(First)	(Middle)	(Suffix
or				
(if an entity) (Caution: Do not provide both a	n individual and an entity name.)			
Mailing address	3645 Muskrat Cr	eek Dr.		
	(Street num	(Street number and name or Post Office Box information)		
	Fort Collins	CO	80528	
	(City)	(State) United State	(ZIP/Postal C	Code)
	(Province – if applica			
	pany has one or more addition and mailing address of each su liability company is vested in	ich person are state		•
6. (The following statement is adopted by ma	arking the box.) or of the limited liability comp	any.		
. (If the following statement applies, adopt	the statement by marking the box and it	ıclude 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

Wilson	Zachary	G.	
425 W. Mulberry St. St	( <i>First</i> ) e. 208	(Middle)	(Suffix)
(Street number	and name or Post Of	fice Box information)	
Fort Collins	CO	80521	
(City)	(State) United St	(ZIP/Postal C tates	Code)
(Province – if applicable)	(Countr		

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

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