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filed pursuant to §7-90-301, et se	Periodic Report eq. and §7-90-501 of the C	olorado Revise	ed Statutes (C.R.S)	
ID number:	20131690604			
Entity name:	Medical Solutions, Inc.			
Jurisdiction under the law of which the entity was formed or registered:	Colorado			
1. Principal office street address:	950 S. Cherry St. Suite 300 (Street name and number)			
	Denver	СО	80246	
	(City)	(State) United	(Postal/Zip Code) States	
	(Province – if applicable)	(Country –	if not US)	
2. Principal office mailing address: (if different from above)	(Street name and number or Post Office Box information)			
	(City)	(State)	(Postal/Zip Code)	
	(Province – if applicable)	(Country -	- if not US)	
3. Registered agent name: (if an individual)	Gustafson	Lawrence (First)	(Middle) (Suffix)	
or (if a business organization)		(1050)	(
4. The person identified above as registered	d agent has consented to b	eing so appoin	ted.	
5. Registered agent street address:	950 S. Cherry St. Su			
5. Registered agent sireet address.	(Street name and number)			
	Denver	СО	80246	
	(City)	(State)	(Postal/Zip Code)	
6. Registered agent mailing address: (if different from above)	(Street name and number or Post Office Box information)			
	(City)	(State)	(Postal/Zip Code)	
	(Province – if applicable)	(Country – if	not US)	

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individual(s) causing the document to be delivered for filing:	Rivas	Betty	М	
	(Last)	(First)	(Middle) (Suffix)	
	950 S. Cherry Street			
	(Street name and number or Post Office Box information) Suite 300			
	Denver	CO 802	CO 80246	
	(City)	United State	(Postal/Zip Code)	
	(Province – if applicable	($Country - if not U$	US)	

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