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## Articles of Incorporation for a Nonprofit Corporation

filed pursuant to § 7-122-101 and § 7-122-102 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name for Next Step Ministry Partners the nonprofit corporation is (Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.) 2. The principal office address of the nonprofit corporation's initial principal office is 18750 Monte Escondido Dr. Street address (Street number and name) **Buena Vista** CO 81211 (ZIP/Postal Code) (City) (State) United States (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 nonprofit corporation's initial registered agent are

Name (if an individual)	Tucker	Shannon	W	
OR	(Last)	(First)	(Middle)	(Suffix)
(if an entity) ( <i>Caution: Do not provide both</i>	an individual and an entity name.)			
Street address	18750 Monte Escondido Dr.			
	(Street number and name)			
	Buena Vista	00	81211	

(City)

(State)

(leave blank if same as street address	(Street number and name or Post Office Box information)				
		СО	 <u>)                               </u>		
	(City)	(State)	(ZIP Code)	)	
The following statement is adopted by marking	the box.)				
The person appointed as register	,	d to being so app	ointed.		
		0 11			
The true name and mailing address of	of the incorporator are				
Name					
(if an individual)	Tucker	Shannon	W		
	(Last)	(First)	(Middle)	(Suffix	
OR					
(if an entity)					
(Caution: Do not provide both an ind	lividual and an entity name.)				
Mailing address	18750 Monte Escondido Dr.				
Maning address	(Street number and name or Post Office Box information)				
	Buena Vista	CO	81211		
	(City)	United St	(ZIP/Postal C tates .	ode)	
	(Province – if applicable)	(Country)	)		

additional incorporator are stated in an attachment.

5. (If the following statement applies, adopt the statement by marking the box.)

The nonprofit corporation will have voting members.

6. Provisions regarding the distribution of assets on dissolution:

Upon dissolution of this nonprofit corporation, all assets will be distributed to Valley Fellowship Church, PO Box 2055, 608 S. San Juan, Buena Vista, CO 81211

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

## Notice:

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

Tucker	Shannon	W	
(Last)	(First)	(Middle)	(Suffix)
18750 Monte Escono	dido Dr.		
(Street number	and name or Post Offi	ce Box information)	
Buena Vista	CO	81211	
(City)	(State)	(ZIP/Postal C	ode)
	United St	tates .	
(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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