



Colorado Secretary of State  
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**Statement of Correction**  
**Correcting the Registered Agent Information**

filed pursuant to § 7-90-305 and § 7-90-703 of the Colorado Revised Statutes (C.R.S.)

1. The entity ID number and the entity name, or, if the entity does not have an entity name, the true name are

Entity ID number 20221725271  
(Colorado Secretary of State ID number)

Entity name or True name DUAL LIMO LLC

2. The document number of the filed document that is corrected is 20231587125

3. (If applicable, adopt the following statement by marking the box and enter all changes.)

☒ The registered agent name as stated in the document identified above is incorrect.

Such name, as corrected, is

Name  
(if an individual) Duale Hanad \_\_\_\_\_  
(Last) (First) (Middle) (Suffix)

or

(if an entity) \_\_\_\_\_  
(Caution: Do not provide both an individual and an entity name.)

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

☒ The person appointed as registered agent has consented to being so appointed.

4. (If applicable, adopt the following statement by marking the box and enter all changes.)

☒ The registered agent address as stated in the document identified above is incorrect.

Such address, as corrected, is

Street address 1110 S Joliet St Apt 306  
(Street number and name)

Aurora CO 80012  
(City) (State) (ZIP Code)

Mailing address 1110 S Joliet St Apt 306  
(leave blank if same as street address) (Street number and name or Post Office Box information)

Aurora CO 80012  
(City) (State) (ZIP Code)

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

☒ Notice of the correction has been delivered to the entity.

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

☐ This document contains additional information as provided by law.

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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 identified in this document as one who has caused it to be delivered.

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

<u>Duale</u>	<u>Hanad</u>		
(Last)	(First)	(Middle)	(Suffix)
<u>1110 S Joliet St Apt 306</u>			
(Street number and name or Post Office Box information)			
<hr/>			
<u>Aurora</u>	<u>CO</u>	<u>80012</u>	
(City)	(State)	(Zip/Postal Code)	
<u>United States</u>			
(Province – if applicable)		(Country)	

(If applicable, adopt the following 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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