Form must be filed electronically. Paper forms are not accepted. This copy is a sample and cannot be submitted for filing.

ABOVE SPACE FOR OFFICE USE ONLY

Articles of filed pursuant to § 7-56-201 ar	Incorporation for a Co ad § 7-101-503 of the Color		tutes (C.R.S.)		
1. This is a Public Benefit Corporation.					
2. The domestic entity name of the cooper	ative is			\mathcal{D}	
(Caution: The use of certain terms or abbrevia	ations are restricted by law. Rea	ud instructions for n	nore information.)	
. The principal office address of the coop	erative's principal office is				
Street address	(Street number and name)				
	(City)	(State)	(ZIP/Postal C	'ode)	
	(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 C	'ode)	
	(Province – if applicable)		(Country)		
. The registered agent name and registere		orotivo's initial r		050	
	a agent address of the coop		egistered agent	arc	
Name (if an individual)					
or	(Last)	(First)	(Middle)	(Suffix)	
(if an entity) (Caution: Do not provide both an individu	ual and an entity name.)				
Street address					
Succe address	(Street number and name)				
)		СО			
	(City)	(State)	(ZIP Code)		

Mailing address					
(leave blank if same as street address)	(Street number and name or Post Office Box information)				
-	СО				
	(City)	(State)	(ZIP Code)		
(The following statement is adopted by marking the be	ox.)				
The person appointed as registered a	gent above has consented to	o being so appoir	nted.		
. The purposes for which the corporation v	was formed are				
	•				
The true name and mailing address of the	e incorporator are				
The true name and mailing address of the Name	e incorporator are		$\langle \mathcal{O} \rangle$		
The true name and mailing address of the Name (if an individual)		(First)	(Middle)		
Name	e incorporator are (Last)	(First)	(Middle)		
Name (if an individual) or		(First)	(Middle)	(Suffix)	
Name (if an individual)	(Last)	(First)	(Middle)		
Name (if an individual) or (if an entity) (Caution: Do not provide both an individual)	(Last)	(First)	(Middle)	(Suffix)	
Name (if an individual) or (if an entity)	(Last)	(First)			
Name (if an individual) or (if an entity) (Caution: Do not provide both an individual)	(Last)				
Name (if an individual) or (if an entity) (Caution: Do not provide both an individual)	(Last) al and an entity name.) (Street number and	I name or Post Office .	Box information)		
Name (if an individual) or (if an entity) (Caution: Do not provide both an individua	(Last)				

The cooperative has one or more additional incorporators and the name and mailing address of each additional incorporator are stated in an attachment.

7. The cooperative is formed

(Mark the applicable box.)

with stock. The classes of shares and the number of shares of each class the cooperative is authorized to issue are stated in an attachment. If the stock is divided into preferred and common stock, voting and nonvoting stock, or into any other class of stock, the attachment states the number of shares of stock in each class and the nature and extent of the preferences, limitations, relative rights, and privileges granted to each.

or

without common voting stock. The attachment to this document states whether the property rights and interests of each member are equal or unequal and, if unequal, the general rule or rules applicable to all members by which the property rights and interests of each member are determined and fixed; provisions for the admission of new members who are entitled to share in the property of the cooperative with the old members in accordance with such general rules; and whether the cooperative is authorized to issue one or more classes of preferred stock or other equity interests and, if so authorized, a statement as to the number of shares of stock of each class or other equity interests and the nature and extent of the preferences, limitations, relative rights, and privileges granted to each.

8. (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.

9. (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

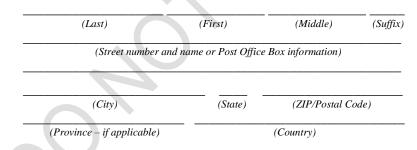
(mm/dd/yyyy hour:minute am/pm)

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.

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



⁽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.

Disclaimer:

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).