

OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF DOCUMENT FILED**

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office, the attached document is a true and complete copy of the

Articles of Incorporation

with Document # 20071279311 of  
Red Rocks Subdivision Association, Inc.

Colorado Nonprofit Corporation

(Entity ID # 20071279311 )

consisting of 4 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 07/13/2017 that have been posted, and by documents delivered to this office electronically through 07/14/2017 @ 10:54:01.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 07/14/2017 @ 10:54:01 in accordance with applicable law. This certificate is assigned Confirmation Number 10342102 .



A handwritten signature in blue ink that reads "Wayne W. Williams".

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*

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Colorado Secretary of State  
Date and Time: 06/14/2007 03:50 PM  
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### Articles of Incorporation for a Nonprofit Corporation

filed pursuant to [§7-90-301](#), et seq. and [§7-122-101](#) of the Colorado Revised Statutes (C.R.S.)

1. Entity name:

Red Rocks Subdivision Association, Inc.

*(The name of a nonprofit corporation may, but need not, contain the term or abbreviation "corporation", "incorporated", "company", "limited", "corp.", "inc.", "co." or "ltd." §7-90-601, C.R.S.)*

2. Use of Restricted Words *(if any of these terms are contained in an entity name, true name of an entity, trade name or trademark stated in this document, mark the applicable box):*

- ☐ "bank" or "trust" or any derivative thereof  
☐ "credit union" ☐ "savings and loan"  
☐ "insurance", "casualty", "mutual", or "surety"

3. Principal office street address:

514 28 1/4 Road, Suite 5

*(Street name and number)*

Grand Junction

*(City)*

CO

*(State)*

81501

*(Postal/Zip Code)*

United States

*(Country – if not US)*

*(Province – if applicable)*

4. Principal office mailing address:  
(if different from above)

P.O. Box 2161

*(Street name and number or Post Office Box information)*

Grand Junction

*(City)*

CO

*(State)*

81502

*(Postal/Zip Code)*

United States

*(Country – if not US)*

*(Province – if applicable)*

5. Registered agent: (if an individual):

Milyard

*(Last)*

Bruce

*(First)*

*(Middle)*

*(Suffix)*

**OR** (if a business organization):

6. The person appointed as registered agent in the document has consented to being so appointed.

7. Registered agent street address:

514 28 1/4 Road, Suite 5

*(Street name and number)*

Grand Junction

*(City)*

CO

*(State)*

81501

*(Postal/Zip Code)*

8. Registered agent mailing address:  
(if different from above)

P.O. Box 2161

*(Street name and number or Post Office Box information)*

Grand Junction CO 81502  
(City) (State) (Postal/Zip Code)  
United States  
(Province – if applicable) (Country – if not US)

9. If the corporation's period of duration is less than perpetual, state the date on which the period of duration expires:

(mm/dd/yyyy)

10. (Optional) Delayed effective date:

(mm/dd/yyyy)

11. Name(s) and address(es) of incorporator(s): (if an individual)

Milyard Bruce  
(Last) (First) (Middle) (Suffix)

OR (if a business organization)

P.O. Box 2161  
(Street name and number or Post Office Box information)

Grand Junction CO 81502  
(City) (State) (Postal/Zip Code)  
United States  
(Province – if applicable) (Country – if not US)

(if an individual)

(Last) (First) (Middle) (Suffix)

OR (if a business organization)

(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code)  
United States  
(Province – if applicable) (Country – if not US)

(if an individual)

(Last) (First) (Middle) (Suffix)

OR (if a business organization)

(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code)  
United States  
(Province – if applicable) (Country – if not US)

(If more than three incorporators, mark this box ☐ and include an attachment stating the names and addresses of all incorporators.)

12. The nonprofit corporation is formed under the Colorado Revised Nonprofit Corporation Act.
13. The corporation will ☒ **OR** will not ☐ have voting members.
14. A description of the distribution of assets upon dissolution is attached.
15. Additional information may be included pursuant to §7-122-102, C.R.S. and other organic statutes. If applicable, mark this box ☐ and include an attachment stating the additional information.

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.

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16. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:

<u>Livingston</u>	<u>J.</u>	<u>Richard</u>	
<small>(Last)</small>	<small>(First)</small>	<small>(Middle)</small>	<small>(Suffix)</small>
<u>P.O. Box 398</u>			
<small>(Street name and number or Post Office Box information)</small>			
<hr/>			
<u>Grand Junction</u>	<u>CO</u>	<u>81502-0398</u>	
<small>(City)</small>	<small>(State)</small>	<small>(Postal/Zip Code)</small>	
<u></u>	<u>United States</u>		
<small>(Province – if applicable)</small>	<small>(Country – if not US)</small>		

*(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark this box ☐ and include an attachment stating the name and address of such individuals.)*

### Disclaimer:

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Attachment to Articles of Incorporation for a Non Profit Corporation

14. A description of the distribution of assets upon dissolution:

Distribution pursuant to §38-33.3-218, C.R.S., as amended.