	' ≣-Filed	Colorado Secret Date and Time:	•	13 PM		
Document processing fee		Id Number: 20081363273				
If document is filed on paper If document is filed electronically Fees & forms/cover sheets	\$125.00 \$ 50.00	Document number: 20081363273				
are subject to change. To file electronically, access instructions for this form/cover sheet and other information or print copies of filed documents, visit <u>www.sos.state.co.us</u>						
and select Business Center. Paper documents must be typewritten or r	nachine printed.		ABOVE SPACE FOR OFF	ICE USE ONLY		
	Articles of Organi					
filed pursuant to §7-90-301, et s	eq. and §7-80-204 of	the Colorado Revised	d Statutes (C.R.S)			
1. Entity name:	Indian Springs Land and Cattle Co., LLC (The name of a limited liability company must contain the term or abbreviation "limited liability company", "Itd. liability company", "limited liability co.", "Itd. liability co.", "limited", "Ilc", "I.I.c.", or "Itd." §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):	"credit union	ust" or any derivative "	nd loan"			
3. Principal office street address:	9910 East Costilla Avenue					
	Suite F and G		,			
	Centennial	<u> </u>	80112			
	(City)	United S	States (Postal/Zip C	Code)		
	(Province – if applic	cable) (Country – į	f not US)			
4. Principal office mailing address (if different from above):	(Street name	and number or Post Office	Box information)			
	(City)	(State)	(Postal/Zip C	Code)		
	(Province – if applic	cable) (Country – į	f not US)			
5. Registered agent name (if an individual):		Leonard	<u>N.</u>			
	(Last)	(First)	(Middle)	(Suffix)		
OR (if a business organization)	:					
6. The person identified above as registered	ed agent has consente	d to being so appoint	ed.			
7. Registered agent street address:	455 Sherman S					
	Suite 300	(Street name and number	·)			
	Denver	00	80203			

(City)

(Postal/Zip Code)

CO

(State)

8. Registered agent maili (if different from above):		(Street name and number or Post Office Box information)					
		(City)	(State)	(Postal/Zip C	Code)		
		(Province – if applicable	e) (Country – į	if not US)			
9. Name(s) and mailing a of person(s) forming t liability company:							
naointy company.	(if an individual)	Mays	Wallace	M			
		(Last)	(First)	(Middle)	(Suffix)		
OR (if a bus	siness organization)						
		9910 East Costilla Avenue Suite F and G ^(Street name and number or Post Office Box information)					
		Centennial		80112			
		(City)	United S	States (Postal/Zip C	Code)		
		(Province – if applicable	e) (Country – į	if not US)			
	(if an individual))					
	``````````````````````````````````````	(Last)	(First)	(Middle)	(Suffix)		
<b>OR</b> (if a bu	usiness organization)	)					
		(Street name and number or Post Office Box information)					
		(City)	United S	United States (Postal/Zip Code)			
		(Province – if applicable	e) (Country – į	if not US)			
	(if an individual)						
	(II un marviaua)	(Last)	(First)	(Middle)	(Suffix)		
<b>OR</b> (if a bu	usiness organization)	)					
		(Street name and number or Post Office Box information)					
		(City)	United S	States (Postal/Zip C	Code)		
		(Province – if applicable	e) (Country – į	if not US)			
		limited liability company, mark al persons forming the limited li		de an attachment statin	ng the true		
10. The management of t <b>OR</b> is vested in the r		ty company is vested in n	nanagers 🖌				

11. There is at least one member of the limited liability company.

12. (Optional) Delayed effective date:

(mm/dd/yyyy)

13. Additional information may be included pursuant to other organic statutes such as title 12, C.R.S. 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.

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.

14. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:	Lotterhos	Kelly	L		
	455 Sherman St	(First)	(Middle)	(Suffix)	
	Suite 300 ^(Street name and number or Post Office Box information)				
	Denver	СО	80203		
	(City)	United State	tates (Postal/Zip C	Code)	
	(Province – if applicable	(Country – if	not US)		

(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  $\Box$  and include an attachment stating the name and address of such individuals.)

## Disclaimer:

This form, and any related instructions, are not intended to provide legal, business or tax advice, and are offered as a public service without representation or warranty. While this form 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. Questions should be addressed to the user's attorney.