

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF DOCUMENT FILED

I, Jena Griswold, 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

Report

with Document # 20191102940 of
COLORADO LIONS KIDSIGHT PROGRAM, INC.

Colorado Nonprofit Corporation

(Entity ID # 20111612034)

consisting of 2 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 05/08/2019 that have been posted, and by documents delivered to this office electronically through 05/09/2019 @ 15:18:19.

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 05/09/2019 @ 15:18:19 in accordance with applicable law. This certificate is assigned Confirmation Number 11564947.



A handwritten signature in blue ink that reads "Jena Griswold".

Secretary of State of the State of Colorado

*****End of Certificate*****
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Colorado Secretary of State
 Date and Time: 02/01/2019 11:09 AM
 ID Number: 20111612034
 Document number: 20191102940
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Periodic Report

filed pursuant to §7-90-301, et seq. and §7-90-501 of the Colorado Revised Statutes (C.R.S)

ID number: 20111612034

Entity name: COLORADO LIONS KIDSIGHT PROGRAM, INC.

Jurisdiction under the law of which the
 entity was formed or registered: Colorado

1. Principal office street address: 8200 - S. QUEBEC STREET
(Street name and number)
#A3-704
CENTENNIAL CO 80112
(City) (State) (Postal/Zip Code)
United States
(Province – if applicable) (Country – if not US)

2. Principal office mailing address:
 (if different from above) (Street name and number or Post Office Box information)
(City) (State) (Postal/Zip Code)
(Province – if applicable) (Country – if not US)

3. Registered agent name: (if an individual) KREBSBACH STEVE
(Last) (First) (Middle) (Suffix)
 or (if a business organization) _____

4. The person identified above as registered agent has consented to being so appointed.

5. Registered agent street address: 8200 S QUEBEC STREET
(Street name and number)
#A3-704
CENTENNIAL CO 80112
(City) (State) (Postal/Zip Code)

6. Registered agent mailing address:
 (if different from above) 8200 S Quebec St.
(Street name and number or Post Office Box information)
A3-704
Centennial CO 80112
(City) (State) (Postal/Zip Code)
United States
(Province – if applicable) (Country – if not US)

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A3-704			
Centennial			
<i>(City)</i>	CO	80112	<i>(Postal/Zip Code)</i>
	United States		
<i>(Province – if applicable)</i>	<i>(Country – if not US)</i>		

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