



Colorado Secretary of State  
 Date and Time: 01/11/2017 12:44 PM  
 ID Number: 20171027625  
 Document number: 20171027625  
 Amount Paid: \$50.00

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**Articles of Incorporation for a Nonprofit Corporation**

filed pursuant to § 7-122-101 and § 7-122-102 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name for the nonprofit corporation is Ultimate Garage Club Condominium Owners Association, Inc.  
*(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)*

2. The principal office address of the nonprofit corporation's initial principal office is

Street address 301 East Boardwalk Drive, #270038  
*(Street number and name)*

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Fort Collins CO 80525  
*(City) (State) (ZIP/Postal Code)*

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United States  
*(Country)*

Mailing address  
*(leave blank if same as street address)* PO Box 270038  
*(Street number and name or Post Office Box information)*

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Fort Collins CO 80527  
*(City) (State) (ZIP/Postal Code)*

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United States  
*(Country)*

3. The registered agent name and registered agent address of the nonprofit corporation's initial registered agent are

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

**OR**

(if an entity) Wright Real Estate, Inc.  
*(Caution: Do not provide both an individual and an entity name.)*

Street address 301 East Boardwalk Drive, #270038  
*(Street number and name)*

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Fort Collins CO 80525  
*(City) (State) (ZIP Code)*

Mailing address  
(leave blank if same as street address)

PO Box 270038  
*(Street number and name or Post Office Box information)*

Fort Collins                      CO    80527  
*(City)*                                      *(State)*                      *(ZIP Code)*

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

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

4. The true name and mailing address of the incorporator are

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

**OR**

(if an entity)                      Wright Real Estate, Inc.  
*(Caution: Do not provide both an individual and an entity name.)*

Mailing address                      PO Box 270038  
*(Street number and name or Post Office Box information)*

Fort Collins                      CO    80527  
*(City)*                                      *(State)*                      *(ZIP/Postal Code)*  
\_\_\_\_\_  
*(Province – if applicable)*                      United States  
*(Country)*

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

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

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

The nonprofit corporation will have voting members.

6. Provisions regarding the distribution of assets on dissolution:

All liabilities shall be paid; all assets held by the association requiring return, transfer, or conveyance, which condition occurs by reason of dissolution, shall be returned, transferred, or made in accordance with such requirement; assets received and held by the Association not subject to liabilities, conditions, or use limitations as specified above should be distributed to the Owners of Units prorate according to ownership interest as provided by the Declaration.

7. (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.

8. (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:**

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

Smith \_\_\_\_\_ Gretchen "Demi" \_\_\_\_\_  
(Last) (First) (Middle) (Suffix)  
301 East Boardwalk Drive, #270038 \_\_\_\_\_  
(Street number and name or Post Office Box information)  
\_\_\_\_\_  
Fort Collins \_\_\_\_\_ CO \_\_\_\_\_ 80525 \_\_\_\_\_  
(City) (State) (ZIP/Postal Code)  
\_\_\_\_\_  
(Province – if applicable) United States \_\_\_\_\_  
(Country)

(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.

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