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Date and Time: 10/15/2004 09:36 AM

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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: | | | | |
|---|--|---------------------|-------------------|--|
| 1. Entity name. | | | | |
| | River Park Owners Association, Inc. (The name of a nonprofit corporation may, but need not, contain the term or abbreviation) | | | |
| | "corporation", "incorporated", §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, make the applicable selection): | ☐ "bank" or "trust" or any derivative thereof ☐ "credit union" ☐ "savings and loan" ☐ "insurance", "casualty", "mutual", or "surety" | | | |
| 3. Principal office street address: | 618 Mountain Village Blvd. (Street name and number) Suite #105 Centrum Building | | | |
| | | | | |
| | Telluride | CO | 81435 | |
| | (City) | (State) | (Postal/Zip Code) | |
| | (Province – if applicable) | (Country – if not | US) | |
| 4. 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) | |
| 5. Registered agent: (if an individual): | Escure | Ramon | M. ESQ | |
| OR (if a business organization): | (Last) | (First) | (Middle) (Suffix) | |
| 6. The person appointed as registered age | ent in the document has cor | nsented to being so | appointed. | |
| | 222 West Colorado | _ | upp control | |
| 7. Registered agent street address: | Pekkarine Building Unit #2 | | | |
| | Telluride | CO | 81435 | |

| | (City) | (State) | (Postal/Zip Co | ode) | |
|--|---|------------------------|---------------------|----------|--|
| 8. Registered agent mailing address: (if different from above) | P.O. Box 2542 (Street name and number or Post Office Box information) | | | | |
| | Telluride CO 81 | | 81435 | 1435 | |
| | (City) | United Sta | (Postal/Zip Co | ode) | |
| | (Province – if applicable) | (Country – if no | ot 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): | Jackson | Benjamin | F. | | |
| OR (if a business organization): | (Last) | (First) | (Middle) | (Suffix | |
| | | | | | |
| | 618 Mountain Villag | | ce Box information) | | |
| | (Street name and number or Post Office Box information) Suite #105 Centrum Building | | | | |
| | Telluride | <u>CO</u> | 81435 | | |
| | (City) | United Sta | (Postal/Zip Co | ode) | |
| | (Province – if applicable) | (Country – if no | ot US) | | |
| (if an individual) | | | | | |
| OR (if a business organization) | (Last) | (First) | (Middle) | (Suffix | |
| OI (if a submess organization) | | | | | |
| | (Street name and number or Post Office Box information) | | | | |
| | (City) | (State) | (Postal/Zip Co | ode) | |
| | (Province – if applicable) | United Sta | ates | , | |
| | (Province 'ly applicable) | (Country if no | . 03) | | |
| (if an individual) | (Last) | (First) | | (Suffix | |
| OR (if a business organization) | (Lust) | (First) | (muate) | (Зијја, | |
| | | | | | |
| | (Street name and | d number or Post Offic | e Box information) | | |
| | | | | | |

| | (City) | United States | (Postal/Zip Code) | | |
|--|----------------------------|-----------------------|-------------------|--|--|
| | (Province – if applicable) | (Country – if not US) | | | |
| (If more than three incorporators, mark this box \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 \square OR will not \square 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 \square 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.

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

| Escure | Ramon | M. | ESQ |
|----------------------------|------------------------|---------------------|----------|
| P.O. Box 2542 | (First) | (Middle) | (Suffix) |
| (Street name an | d number or Post Offic | ce Box information) | |
| Telluride | СО | 81435 | |
| (City) | United St | (Postal/Zip Co | ode) |
| (Province – if applicable) | (Country – if no | ot 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 \square 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.

River Park Owners Association, Inc.

ARTICLE OF DISSOLUTION

The River Park Owners Association, Inc. will be dissolved in twenty (20) years unless a vote of a majority or members agrees to keep established. If remains in tact dissolution

vote shall occur every ten (10) years thereafter. Written notice of a proposal to dissolve, setting forth the reasons thereof and the disposition to be made of the assets, as set forth

below, shall be mailed to every member at least 90 days in advance of any action taken.

Upon dissolution of the River Park Owners Association, Inc., the assets, both real and personal, of the corporation, shall be dedicated to an appropriate public agency or agencies

or utility to be devoted to purposes as nearly as practicable the same as those to which they were required to be devoted by the Association. In the event that such dedication is

not accepted, such assets shall be granted, conveyed and assigned to any nonprofit corporation, association, trust or other organization to be devoted to purposes as nearly as practicable the same as those to which they were required to be devoted by the Association. No such disposition of the River Park Owners Association, Inc. properties shall be effective to divest or diminish any right or title of any member vested in him under the recorded covenants and deeds applicable to River Park unless made in accordance

with the provisions of such covenants and deeds.