

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM525448

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Optimization Resources Inc.		10/02/2018	Corporation:
RECEIVING PARTY DATA			
Name:	Optimization Resources II, LLC		
Street Address:	414 E Oak Street		
City:	Fort Collins		
State/Country:	COLORADO		
Postal Code:	80524		
Entity Type:	Limited Liability Company: COLORADO		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	2353478	DATASPLICE	
CORRESPONDENCE DATA			
Fax Number:	6172359492		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>			
Phone:	2125969167		
Email:	gary.lee@ropesgray.com		
Correspondent Name:	Gary Lee		
Address Line 1:	Ropes and Gray LLP, 1211 Avenue of the a		
Address Line 2:	39th Floor		
Address Line 4:	New York, NEW YORK 10036-8704		
ATTORNEY DOCKET NUMBER:	109251-0055		
NAME OF SUBMITTER:	Gary Lee		
SIGNATURE:	/Gary Lee/		
DATE SIGNED:	05/29/2019		
Total Attachments: 15			
source=Optimization Resources II, LLC - CO - Certified Charter#page1.tif			
source=Optimization Resources II, LLC - CO - Certified Charter#page2.tif			
source=Optimization Resources II, LLC - CO - Certified Charter#page3.tif			
source=Optimization Resources II, LLC - CO - Certified Charter#page4.tif			

CH \$40.00 2353478

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source=Optimization Resources II, LLC - CO - Certified Charter#page7.tif
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source=Optimization Resources II, LLC - CO - Certified Charter#page11.tif
source=Optimization Resources II, LLC - CO - Certified Charter#page12.tif
source=Optimization Resources II, LLC - CO - Certified Charter#page13.tif
source=Optimization Resources II, LLC - CO - Certified Charter#page14.tif
source=Optimization Resources II, LLC - CO - Certified Charter#page15.tif

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF DOCUMENTS 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 documents are true and complete copies of all documents relating to:

OPTIMIZATION RESOURCES II, LLC

Colorado Limited Liability Company

(Entity ID # 19951145802)

consisting of 42 pages as filed in this office.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 05/06/2019 that have been posted, and by documents delivered to this office electronically through 05/07/2019 @ 15:23:03 .

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 05/07/2019 @ 15:23:03 in accordance with applicable law. This certificate is assigned Confirmation Number 11559856 .



Handwritten signature of Jena Griswold in cursive script.

Secretary of State of the State of Colorado

*****End of Certificate*****
Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."

Please include a typed self-addressed envelope

Mail to: Secretary of State
Corporations Section
1560 Broadway, Suite 200
Denver, CO 80202
(303) 894-2251
Fax (303) 894-2242

For office use only

MUST BE TYPED
FILING FEE: \$50.00
MUST SUBMIT TWO COPIES
DELAYED EFFECTIVE DATE

.....REJECTED.....
951108792 M \$50.00
SECRETARY OF STATE
08-31-95 11:20

1/1/96
Name Optimization Resources Inc.

ARTICLES OF INCORPORATION

951145802 M \$50.00
SECRETARY OF STATE
11-29-95 14:54

Principal Street Address 117 East Mountain Avenue, Suite 205, Fort Collins, CO 80524

Cumulative voting shares of stock is authorized. Yes No

.....REJECTED.....
951114540 M \$50.00
SECRETARY OF STATE
09-15-95 11:43

If duration is less than perpetual enter number of years _____

Preemptive rights are granted to shareholders. Yes No

Stock information: (If additional space is needed, continue on a separate sheet of paper.)

Stock Class Common Authorized Shares X 50,000 Par Value None

Stock Class _____ Authorized Shares _____ Par Value _____

The name of the initial registered agent and the address of the registered office is:(Corporations use last name space)

Last Name Kunze First & Middle Name Scott

Street Address 117 East Mountain Avenue, Suite 205, Fort Collins, CO 80524

Signature of Registered Agent Scott Kunze

These articles are to have a delayed effective date of: January 1, 1996

Incorporators: Names and addresses: (If more than two, continue on a separate sheet of paper.)

NAME	ADDRESS
<u>Scott Kunze</u>	<u>117 East Mountain Ave., Suite 205, Fort Collins, CO 80524</u>
_____	_____

Incorporators who are natural persons must be 18 years or more. The undersigned, acting as incorporator(s) of a corporation under the Colorado Business Corporation Act, adopt the above Articles of Incorporation.

Signature Scott Kunze Signature _____

COMPUTER UPDATE COMPLETE



STATE OF COLORADO
 BIENNIAL REPORT OF
 A CORPORATION OR LIMITED LIABILITY COMPANY

FEE \$ 25.00
 ON OR BEFORE 03/31/1998 *4/30/98*
 DATE DUE

REPORT YEAR 1998

READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING
 SUBMIT SIGNED FORM WITH FILING FEE

THIS FORM MUST BE TYPED

MAILING DATE 01/01/1998

INFORMATION BELOW IS ON FILE IN THIS OFFICE - DO NOT CHANGE PRE-PRINTED INFORMATION
 CORPORATE NAME REGISTERED AGENT, REGISTERED OFFICE, CITY, STATE & ZIP

19951145802 DPC STATE/COUNTRY OF INC CO KUNZE SCOTT OPTIMIZATION RESOURCES INC. 117 E MOUNTAIN AVE STE 205 FORT COLLINS CO 80524	FOR OFFICE USE ONLY 19981040812 M \$ 25.00 SECRETARY OF STATE 03-03-98 13:26:50
Return completed reports to: Department of State Corporate Report Section 1560 Broadway, Suite 200 Denver, CO 80202	FIRST REPORT OR CORRECTIONS IN THIS COLUMN TYPE NEW AGENT NAME SIGNATURE OF NEW REGISTERED AGENT MUST HAVE A STREET ADDRESS CITY STATE ZIP CO

OFFICERS NAME AND ADDRESS	TITLE	
Scott L. Kunze 1830 Dayton Dr. Fort Collins, CO 80524	Pres. Treas.	19981051231 M \$ 25.00 SECRETARY OF STATE 03-17-98 15:23:34
Nina E. Kunze 1830 Dayton Dr. Fort Collins, CO 80524	V.P./Sec. Treas.	

DIRECTORS OR LIMITED LIABILITY COMPANY MANAGERS	(If you have less than 3 shareholders, you may list less than 3 directors)
Scott L. Kunze - Director	

Address of Principal Place of Business
 Street 117 E. Mountain Ave., Ste. 205
 City Fort Collins State CO Zip 80524

SIGNATURE

Under penalties of perjury and as an authorized officer, I declare that this biennial report and, if applicable, the statement of change of registered office and/or agent, has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete.

BY Scott L. Kunze Authorized Agent
 TITLE President DATE 3/27 19 98

NOTE: DO NOT USE THIS BOX IF THIS IS YOUR FIRST REPORT!!! SEE INSTRUCTIONS ON REVERSE. IF THERE ARE NO CHANGES SINCE YOUR LAST REPORT, MARK THIS BOX. SIGN ABOVE AND RETURN WITH THE FEE AND BY THE DATE DUE INDICATED ABOVE (UPPER LEFT HAND CORNER). IF YOU ARE FILING AFTER THE DATE DUE ABOVE, CONTACT THIS OFFICE FOR THE PROPER FEE. (303) 894-2251

SEE INSTRUCTIONS ON BACK

2486528-3

FEE \$ 25.00
 ON OR BEFORE DATE DUE 03/31/2000
 REPORT YEAR 2000

STATE OF COLORADO
 BIENNIAL REPORT OF
 A CORPORATION OR LIMITED LIABILITY COMPANY

007

READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING
 SUBMIT SIGNED FORM WITH FILING FEE

THIS FORM MUST BE TYPED

MAILING DATE 01/01/2000

INFORMATION BELOW IS ON FILE IN THIS OFFICE - DO NOT CHANGE PRE-PRINTED INFORMATION

CORPORATE NAME REGISTERED AGENT, REGISTERED OFFICE, CITY, STATE & ZIP 19951145802 DPC STATE/COUNTRY OF INC CO KUNZE SCOTT OPTIMIZATION RESOURCES INC. 117 E MOUNTAIN AVE STE 205 FORT COLLINS CO 80524	FOR OFFICE USE ONLY 20001009199 M \$ 25.00 SECRETARY OF STATE 01-14-2000 14:05:04 FIRST REPORT OR CORRECTIONS IN THIS COLUMN
Return completed reports to: Department of State Corporate Report Section 1560 Broadway, Suite 200 Denver, CO 80202	TYPE NEW AGENT NAME SIGNATURE OF NEW REGISTERED AGENT MUST HAVE A STREET ADDRESS CITY STATE ZIP

OFFICERS NAME AND ADDRESS	TITLE	
KUNZE SCOTT L 1830 DAYTON DR FORT COLLINS CO 80524	PR	
KUNZE NINA E 1830 DAYTON DR FORT COLLINS CO 80524	VS	

DIRECTORS OR LIMITED LIABILITY COMPANY MANAGERS	(If you have less than 3 shareholders, you may list less than 3 directors)
KUNZE SCOTT L 1830 DAYTON DR FORT COLLINS CO 80524	
<i>Nina E. Kunze - Director 1830 Dayton Dr. Ft Collins, CO 80524</i>	

Address of Principal Place of Business
 Street 117 E. Mountain Ave, Suite 205
 City Fort Collins State CO Zip 80524

SIGNATURE

Under penalties of perjury and as an authorized officer, I declare that this biennial report and, if applicable, the statement of change of registered office and/or agent, has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete.

BY *Scott Kunze* Authorized Agent
 TITLE President DATE 1/6 1900

PAID

NOTE: DO NOT USE THIS BOX IF THIS IS YOUR FIRST REPORT!!! SEE INSTRUCTIONS ON REVERSE. IF THERE ARE NO CHANGES SINCE YOUR LAST REPORT, MARK THIS BOX, SIGN ABOVE AND RETURN WITH THE FEE AND BY THE DATE DUE INDICATED ABOVE (UPPER LEFT HAND CORNER). IF YOU ARE FILING AFTER THE DATE DUE ABOVE, CONTACT THIS OFFICE FOR THE PROPER FEE. (303) 894-2251

SEE INSTRUCTIONS ON BACK

52986528 3

Donetta Davidson
SECRETARY OF STATE

DEPARTMENT OF STATE
1560 Broadway Suite 200
Denver, Colorado 80202

Commercial Filings
303-894-2200



DISSOLVED -- SECRETARY OF STATE
OPTIMIZATION RESOURCES INC.
APPOINTED BY LAW

20021253646 M
\$ 70.00
SECRETARY OF STATE
09-13-2002 10:44:59

APPLICATION FOR RE-INSTATEMENT MUST BE FILED

19951145802 DPC
STATE/COUNTRY OF INC CO
PERIODIC REPORT

FEE \$70.00 DUE ON OR BEFORE 12/31/2002

PERIODIC REPORT, made pursuant to section 7-90-501, C.R.S., on behalf of the entity identified above. This report must be typed, or if legible, it may be manually printed. Execution (a signature) is not required. Report current information for the following items: no director, officer or any other information is required.

- 1. Name of individual completing Report: LAURA FRANKENBERGER
- 2. Name of entity's Registered Agent: SCOTT KUNZE
- 3. Street Address of entity's Registered Office (must be in Colorado):
414 E OAK STREET, FORT COLLINS, CO 80524
- If mail is undeliverable to this address, ALSO include a P.O. box address: _____
- 4. Address of entity's Principal Office: 414 E OAK STREET
FORT COLLINS, CO 80524
- Optional: 5. Additional mailing address for entity: _____
- Optional: 6. Entity's e-mail address FRANKENBERGER@OPTIMIZ.COM

If more space is required for any of the above items, continue on an attached 8 1/2 x 11 sheet and check here _____

Deliver this Report to:
Colorado Secretary of State
1560 Broadway Ste 200
Denver CO 80202-5169

Include the fee stated above (\$70.00) made payable to: Colorado Secretary of State.
This report must be received (not postmarked) on or before the due date stated above.

For more information, call 303-894-2200, fax 303-869-4864, e-mail sos.business@state.co.us, or visit our Web site, www.sos.state.co.us.

**APPLICATION FOR REINSTATEMENT
FOR A COLORADO PROFIT CORPORATION**

Form 295 Revised July 1, 2002

Filing fee: varies depending on amount of penalties*

Deliver to: Colorado Secretary of State

Business Division, 1560 Broadway, Suite 200

Denver, CO 80202-5169

This document must be typed or machine printed

Copies of filed documents may be obtained at www.sos.state.co.us

19951145802
20021253646 M
\$ 70.00
SECRETARY OF STATE
09-13-2002 10:44:59
ABOVE SPACE FOR OFFICE USE ONLY

Pursuant to § 7-114-203, Colorado Revised Statutes (C.R.S.), the individual named below causes this application for reinstatement to be delivered to the Colorado Secretary of State for filing, and states as follows:

1. The name of the corporation at the time of dissolution: OPTIMIZATION
RESOURCES, INC

2. The effective date of administrative dissolution: _____

3. The new entity name, pursuant to § 7-90-601(3)(a), under which the corporation is to be reinstated (applicable only if the corporate name at the time of dissolution is no longer available): _____

4. The name of the registered agent: SCOTT KUNZE

The street address of the registered agent: 414 E OAK STREET
FORT COLLINS, CO 80524

If mail is undeliverable at this address, include PO Box address _____

5. The ground(s) for dissolution either did not exist or have been eliminated.

6. All taxes, fees, or penalties imposed by Title 7, Articles 101 to 117, C.R.S., have been paid.*

7. The (a) name or names, and (b) mailing address or addresses, of any one or more of the individuals who cause this document to be delivered for filing, and to whom the Secretary of State may deliver notice if filing of this document is refused are: LAURA FRANKENBERGER
414 E. OAK STREET FORT COLLINS CO 80524

OPTIONAL. The electronic mail and/or Internet address for this entity is/are:

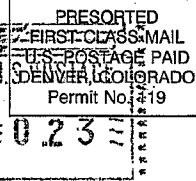
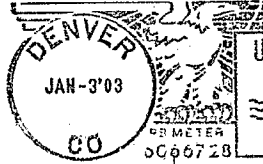
e-mail _____ Web site _____

The Colorado Secretary of State may contact the following authorized person regarding this document: name _____ address _____

voice _____ fax _____ e-mail _____

*Depending on the cause for administration dissolution, this application for reinstatement may need to be accompanied by a completed periodic report and requisite fees. See § 7-114-203, C.R.S.

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 comply with all applicable laws, the user of this form assumes the responsibility of its use.

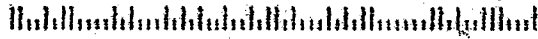


RETURN SERVICE REQUESTED

Due \$25.00 on or before 03/31/2003
19951145802 DPC
ST/CTRY OF INC CO
PERIODIC REPORT DUE

20031018336 M
\$ 25.00
SECRETARY OF STATE
01-16-2003 10:03:37
OPTIMIZATION RESOURCES INC.
KUNZE SCOTT
14 E OAK STREET
MORT COLLINS CO 80524

43



**Official Business – § 7-90-501, C.R.S. -Colorado Secretary of State
Save \$\$! E-file this report at www.sos.state.co.us/periodic-report**

This PERIODIC REPORT is made on behalf of the entity identified on the reverse side. It must be typed or, if legible, may be hand written. Report current information for the following items. All addresses must be complete. **You must complete line 1 or this Report will be rejected.**

1. NAME AND ADDRESS OF INDIVIDUAL RESPONSIBLE FOR THE ACCURACY OF REPORT:
LAURA FRANKENBERGER 414 E OAK ST FORT COLLINS CO 80525

If items 2 – 4 have not changed since your last report, check here . Otherwise, complete 2 – 4.

2. NAME OF ENTITY'S REGISTERED AGENT: (cannot be same business this report is being filed on) _____

3. STREET ADDRESS OF ENTITY'S REGISTERED OFFICE (CO address only): _____

If mail is undeliverable to this address, ALSO include a P.O. Box address: _____

4. ADDRESS OF ENTITY'S PRINCIPAL OFFICE: _____

Optional: 5. Additional mailing address for entity: _____

Deliver this Report to: Colorado Secretary of State, 1560 Broadway, Ste 200, Denver CO 80202-5169, with the fee stated on reverse, payable to: Colorado Secretary of State. A peel-off mailing label is provided. This report must be **received (not postmarked)** on or before the due date stated on the reverse side. For more information www.sos.state.co.us and click on Business Center, call 303 894 2200 press 2, fax 303 869 4864, e-mail sos.business@sos.state.co.us.

No signature required

Form 7.90.505.1 revised 10/2002

E-Filed

2004 Periodic Report

DONETTA DAVIDSON
Colorado Secretary of State

File Number: 20041036705
Filing Fee: \$10.00
Filed: February 2, 2004 09:16 AM MST

Entity ID Number: **19951145802**
Entity Name: **OPTIMIZATION RESOURCES INC.**

Jurisdiction of Formation: CO

Person responsible for accuracy
of report data: LAURA FRANKENBERGER
414 E. OAK STREET
FORT COLLINS CO 80524

Name of Entity's Registered Agent: KUNZE SCOTT

Street Address of Registered Office: 414 E OAK STREET
FORT COLLINS CO 80524

*PO Box Addr of Registered Office:

Address of Entity's Principal Office: 414 E OAK STREET
FORT COLLINS CO 80524, United States

*Entity's Additional Mailing Address:

**Denotes optional information that is not required by law.
If no information is displayed for this item, none was reported by the reporting entity.
All information available to the Secretary of State is displayed above.*

NOTICE:

This "image" is merely a display of information that was filed electronically. It is not an image that was created by optically scanning a paper document. No such paper document was filed. Consequently, no copy of a paper document is available regarding this filing.

Questions? Contact the Business Division. For contact information, please visit the Secretary of State's web site.

TRADEMARK
REEL: 006656 FRAME: 0101



Colorado Secretary of State
 Date and Time: 10/02/2018 10:12 AM
 ID Number: 19951145802
 Document number: 20181784762
 Amount Paid: \$100.00

Document must be filed electronically.
 Paper documents are not accepted.
 Fees & forms are subject to change.
 For more information or to print copies
 of filed documents, visit www.sos.state.co.us.

ABOVE SPACE FOR OFFICE USE ONLY

Statement of Conversion

filed pursuant to § 7-90-201.7 (3) of the Colorado Revised Statutes (C.R.S.)

1. For the converting entity, its ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

ID number	<u>19951145802</u> (Colorado Secretary of State ID number)
Entity name or true name	<u>OPTIMIZATION RESOURCES INC.</u>
Form of entity	<u>Corporation</u>
Jurisdiction	<u>Colorado</u>
Street address	<u>414 E OAK STREET</u> (Street number and name)
	<u>FORT COLLINS</u> <u>CO</u> <u>80524</u> (City) (State) (ZIP/Postal Code)
	<u>United States</u> (Province – if applicable) (Country)
Mailing address (leave blank if same as street address)	<u>(Street number and name or Post Office Box information)</u>
	<u>(City)</u> <u>(State)</u> <u>(ZIP/Postal Code)</u>
	<u>(Province – if applicable)</u> <u>(Country)</u>

2. The entity name of the resulting entity is OPTIMIZATION RESOURCES II, LLC.
 (Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)
3. The converting entity has been converted into the resulting entity pursuant to section 7-90-201.7, C.R.S.
4. (If applicable, adopt the following statement by marking the box and include an attachment.)
 This document contains additional information as provided by law.
5. (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 are _____.
 (mm/dd/yyyy hour:minute am/pm)

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 such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such 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 identified in this document as one who has caused it to be delivered.

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

<u>Kunze</u>	<u>Scott</u>		
(Last)	(First)	(Middle)	(Suffix)
<u>414 E. Oak Street</u>			
(Street number and name or Post Office Box information)			
<hr/>			
<u>Fort Collins</u>	<u>CO</u>	<u>80524</u>	
(City)	(State)	(ZIP/Postal Code)	
<u>United States</u>			
(Province – if applicable)		(Country)	

(If applicable, adopt the following 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.

Disclaimer:

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet 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/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).



Colorado Secretary of State
 Date and Time: 10/02/2018 10:12 AM
 ID Number: 19951145802
 Document number: 20181784762
 Amount Paid: \$100.00

Document must be filed electronically.
 Paper documents are not accepted.
 Fees & forms are subject to change.
 For more information or to print copies
 of filed documents, visit www.sos.state.co.us.

ABOVE SPACE FOR OFFICE USE ONLY

Articles of Organization

filed pursuant to § 7-90-301 and § 7-80-204 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name of the limited liability company is

OPTIMIZATION RESOURCES II, LLC

(The name of a limited liability company must contain the term or abbreviation "limited liability company", "Ltd. liability company", "limited liability co.", "Ltd. liability co.", "limited", "l.l.c.", "llc", or "Ltd.". See §7-90-601, C.R.S.)

(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)

2. The principal office address of the limited liability company's initial principal office is

Street address

414 E OAK STREET

(Street number and name)

FORT COLLINS

(City)

CO

(State)

80524

(ZIP/Postal Code)

United States

(Country)

(Province – if applicable)

Mailing address

(leave blank if same as street address)

(Street number and name or Post Office Box information)

(City)

(State)

(ZIP/Postal Code)

(Province – if applicable)

(Country)

3. The registered agent name and registered agent address of the limited liability company's initial registered agent are

Name

(if an individual)

KUNZE

(Last)

SCOTT

(First)

(Middle)

(Suffix)

or

(if an entity)

(Caution: Do not provide both an individual and an entity name.)

Street address

414 E OAK STREET

(Street number and name)

FORT COLLINS

(City)

CO

(State)

80524

(ZIP Code)

Mailing address

(leave blank if same as street address)

(Street number and name or Post Office Box information)

(City) CO _____
(State) (ZIP Code)

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

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

4. The true name and mailing address of the person forming the limited liability company are

Name
(if an individual) Kunze Scott
(Last) (First) (Middle) (Suffix)

or

(if an entity) _____
(Caution: Do not provide both an individual and an entity name.)

Mailing address 414 E. Oak Street
(Street number and name or Post Office Box information)

Fort Collins CO 80524
(City) (State) (ZIP/Postal Code)
United States
(Province – if applicable) (Country)

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

The limited liability company has one or more additional persons forming the limited liability company and the name and mailing address of each such person are stated in an attachment.

5. The management of the limited liability company is vested in
(Mark the applicable box.)

one or more managers.

or

the members.

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

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

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:

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.

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

<u>Kunze</u>	<u>Scott</u>		
(Last)	(First)	(Middle)	(Suffix)
<u>414 E. Oak Street</u>			
(Street number and name or Post Office Box information)			
<hr/>			
<u>Fort Collins</u>	<u>CO</u>	<u>80524</u>	
(City)	(State)	(ZIP/Postal Code)	
<u>United States</u>			
(Province – if applicable)		(Country)	

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

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Corporations Section
1560 Broadway, Suite 200
Denver, CO 80202
(303) 894-2251
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CERTIFICATE OF
ASSUMED OR TRADE NAME

Optimization Resources, Inc. *no go*, a corporation,
limited partnership or limited liability company under the laws of Colorado,
being desirous of transacting a portion of its business under an assumed or trade name as permitted
by 7-71-101, Colorado Revised Statutes, hereby certifies:

1. The location of its principal office is: 117 East Mountain Avenue, Suite 205, Fort Collins, CO
(Include city, state, zip) 80524

2. The name, other than its own, under which the business is carried on is: WebPower ✓

3. A brief description of the kind of business transacted under such assumed or trade name is:

Creating web sites for businesses including developing Home Pages and registering
customers with a server and e-mail along with advising, consulting, and training
customers on how to use the Web

Limited Partnership or Limited Liability Companies complete this section.	Corporations complete this section
Name of Entity	Optimization Resources, Inc. Name of Corporation
by _____ Signature	by <u>Scott Kunze</u> Signature
Title, General Partner, or Manager	Its Owner Title

COMP. CH'D. BJS
COMPUTER UPDATE COMPLETE
MP

Revised 7/95