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pattym@ageiss-inc.com

Email Address: pattyni@ageiss-inc.com

# COR AMND/RESTATE/CORRECT OR O/D RESIGN AGEISS INC.

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AUG 2 5 2020

(1)

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## PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607,1504, F.S.)

### SECTION I (1-3 MUST BE COMPLETED)

	F09000005197
	(Document number of corporation (if known)
AGEISS INC.	
(Name of co	reporation as it appears on the records of the Department of State)
Wyoming	laws of) (Date authorized to do business in Florida)
(Incorporated under	laws of) (Date authorized to do business in Florida)
	3
	SECTION II NO SECTION II SECULIA CONTRACTO SECULIA SECUL
(4-7	COMPLETE ONLY THE APPLICABLE CHANGES)
10.1	
_	ne of the corporation, when was the change effected under the laws of ,
its jurisdiction of incorporation?_	
(If new name is unavailable in Flo business in Florida)	rida, enter alternate corporate name adopted for the purpose of transacting
. If the amendment changes the per	iod of duration, indicate new period of duration.
	(New dination)
	isdiction of incorporation, indicate new jurisdiction. forado
<del></del>	(New jurisdiction)
Attached is a certificate or docum 90 days prior to delivery of the ap having custody of corporate record	ent of similar import, evidencing the amendment, authenticated not more to plication to the Department of State, by the Secretary of State or other offices in the jurisdiction under the laws of which it is incorporated.
Donna B. Law	
(Signature of a director, president of a receiver or other court appo	at or other officer - if in the hands inted fiduciary, by that fiduciary)
Donna B. Lawrence	Vice-President
(Typed or printed name of p	erson signing) (Title of person signing)

## 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

Combined Statement of Conversion

with Document # 20201587711 of AGEISS Inc.

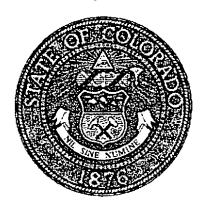
Colorado Corporation

(Entity ID # 19881095167 )

consisting of 5 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/21/2020 that have been posted, and by documents delivered to this office electronically through 08/24/2020@ 09:27:27.

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 08/24/2020 @ 09:27:27 in accordance with applicable law. This certificate is assigned Confirmation Number 12549212



Secretary of State of the State of Colorado

\*\*\*\*\*Endfertificate\*\*\*\*

**=** cu

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.



Colorado Secretary of State

Date and Time: 07/06/2020 11:23 AM

ID Number: 19881095167

Document number: 20201587711

Amount Paid: \$100.00

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(mm/Ad/vyvyhour;mtmiream/pm)

#### **Statement of Conversion**

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

ID number	19881095167		
	(Colorado Secretary of State ID numb	her)	
Entity name or true name	AGEISS Inc.		
Form of entity	Foreign Corporation		
Jurisdiction	Wyoming		
Street address	1740H Dell Range Blvd	. Ste 293	
	(Street n	umber and name	;
	Cheyenne	WY	82009
	CO (Cipy	(State) United S	(ZIP/Posial Code) States
	(Province – if applicable)	tConn.	
Mailing address	P.O. Box 6126		
(leave blank if same as street address)	(Street number and num	ne or Post Office	Box information)
	Longmont	CO	80501
	(Cay)	(State) United S	(ZIP/Postal Code) States
	(Province – if applicable)	(Countr	y)
The entity name of the resulting entity is	AGEISS Inc.		
(Caution: The use of certain terms or abbrev	iations are restricted by law. Rea	d instructions J	for more information )
		rought to coot	ion 7-90-201.7. C.R.S.
The converting entity has been converte	ed into the resulting entity pur	1303111 10 5001	
. The converting entity has been converte	ed into the resulting entity pur	isuant to sect	

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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.

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	(Street number)	and name or Post Offi	ce Box Information)	
	Longmont	СО	80501	
	(City)	United S	(ZIP:Postal Ce	des
	(Province - if applicable)	(Country	7	
elf applicable, adopt the following sta	dement by marking the box and include ar	(attachment)		
<u> </u>	true name and mailing address of	of one or more ac	iditional individua	is
causing the document to be	genvered for ming.			

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Date and Time: 07/06/2020 11:23 AM

1D Number: 19881095167

Document number: 20201587711

Amount Paid: \$100.00

ABOVE SPACETOR OFFICE USE ONLY

## Articles of Incorporation for a Profit Corporation

ne domestic entity name for the corpo	oration is AGEISS Inc.			
	AGEISS Inc.			
aution: The use of certain terms or abbrev	ciations are restricted by law.	. Read instructions fo	or more information.)	i
ne principal office address of the cor	poration's initial principa	al office is		
Street address	7220 W. Jefferson A	Ave. Street number and nam		
	Suite 201	so eel nammer unu num	e,	
	Lakewood	co	80235	
	(City) CO (Province - if applicable	(State) United S		.oder
	п пласс – д арухасия	r) 13.000	w,s <i>y</i>	
Mailing address	P.O. Box 6126			
(leave blank if same as street address)	(Street number)	and name or Post Office	e Box information)	
	Longmont	CO	80501	
	(Citv)	(State)	(ZIP/Postal C	odei
	,	United :		/
	(Province – ij applicabl	<u>United</u> :	States	,
ie registered agent name and register Name ((Can individual)	(Province – (Lapplicable) red agent address of the c	United S (Cour	States nry)	·
Name (if an individual)	(Province – ij applicabl	United S (Cour	States nry)	arc
Name	(Province – if applicable red agent address of the content of the	United S (Cour	States .  al registered agent  B	arc
Name (if an individual)  or  (if an entity) (Cantion: Do not provide both an individual)	(Province – il applicable red agent address of the content of the	United S (Cour	States .  al registered agent  B	arc
Name (if an individual)  or (if an entity)	(Prosince - it applicable red agent address of the declared agent	United S (Cour	States	arc
Name (if an individual)  or  (if an entity) (Cantion: Do not provide both an individual)	(Province - it applicable red agent address of the declarence (Last)  that and an entity name.)  P.O. Box 6126  Longmont	United Street	States  B  (Middle)	arc
Name (if an individual)  or  (if an entity) (Cantion: Do not provide both an individual)	(Province – (Lapplicable red agent address of the content of the c	United Street	States  B  (Middle)	arc
Name (if an individual)  or  (if an entity) (Cantion: Do not provide both an individual)	(Province – ij applicable red agent address of the of Lawrence (Last)  chial and an entity name.)  P.O. Box 6126  Longmont	United Street	States  B  (Middle)  80501  (Z/P/Postal C	arc
Name (if an individual)  or (if an entity) (Caution: Do not provide both an individual)  Street address	(Province – ij applicable red agent address of the of Lawrence (Last)  chial and an entity name.)  P.O. Box 6126  Longmont	United Street number and num  CO (State)	States  B  (Middle)  80501  (Z/P/Postal C	arc

4. The true name and mailing ac	ldress of the incorporator are			
Name	Laurana	l= <b>#</b> ==	5	
(if an individual)	Lawrence (Last)	Jeffrey (First)	B (Middle)	(Suffix)
or	· ·,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2007
(if an entity) (Caution: Do not provide both	h an individual and an entity name.)			
Mailing address	P.O. Box 6126			
J	tStreet numb	er and name or Post Offi	ce Box information)	
	Longmont	CO	80501	
	(Ciry)	<i>iState</i> United	) /ZIP/Postal ( States ,	lode)
	(Province - if applied			
☐ The corporation has o	olies, adopt the statement by marking the ne or more additional incorpora or are stated in an attachment.  The of shares of each class that	tors and the name a	and mailing address	
•	rized to issue 100,000 com receive the net assets of the cor			oting
Information regarding sha attachment.	ares as required by section 7-10	6-101, C.R.S., is in	ncluded in an	
6. Af the following statement applies, add	op) the statement by marking the box and i	include an auachment j		
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(Cay)	(State)	(ZIP/Postal Co	dej
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