F190000003505

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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DBA must motch cert						
W19-66598						

Office Use Only



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July 22, 2019

MICHAEL DELZER 100 FILLMORE ST., STE 500 DENVER, CO 80206

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SUBJECT: IRONWOOD FINANICAL SERVICES INC., DBA FIRST CLASS

FINANCIAL SERVICES

Ref. Number: W19000066598

We have received your document for IRONWOOD FINANICAL SERVICES INC., DBA FIRST CLASS FINANCIAL SERVICES and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Brooke N Kinsey Regulatory Specialist II

Letter Number: 519A00014818

RECEIVED

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COVER LETTER

TO:	~	Registration Section Division of Corporations Ironwood Financial Services Inc., DBA First Class Financial Services				
	•					
CIID I			ic, DBA First C	llass Financial Services		
SOBJ	ECT:	Name of	corporation -	must include suffix		
			•			
Dear S	Sir or Madam:					
"Certi	ficate of Existence		f Good Stand	ng" and check are subi	rt Business in Florida," mitted to register the	
	return all correspo act Delzer	ondence concerning	g this matter to	the following:		
		<u> </u>	Name of Po	rson	_	
First C	Class Financial Serv	ices				
			Firm/Compa	unv		
100 F	illmore St, Suite 500)	T mit Compa	,		
			Address	3		
Denve	er, CO 80206					
	-		City/State and	Zin code		
mike@	@fcfsdenver.com					
		E-mail address: (to be used for	future annual report n	otification)	
For fu	rther information c	concerning this mat	ter, please cal	l:		
Michael Delzer			720	904-9048		
			. ()		
	Name of Person		Area Code	Daytime Teleph	one Number	
STREET/COURIER ADDRESS:				MAILING ADDRESS:		
Registration Section Division of Corporations			Registration Section Division of Corporations			
Clifton Building				P.O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32301				Tallahassee, Fl. 32314		
	ramanassee, FL	32301				
Enclos	sed is a check for t	he following amou	nt:			
□ \$70	0.00 Filing Fee	S78.75 Filing l Certificate of		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee. Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. Ironwood Financial Services Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (FEI number, if applicable) (State or country under the law of which it is incorporated) 1/25/2002 (Date of duration, if other than perpetual) (Date of incorporation) NA(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 100 Fillmore St., Suite 500, Denver, CO 80206 (Principal office address) Same as above (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Mark Ross Name: 4237 Lakeside Dr Office Address: Jacksonville (City) (Zip code) 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's s

under the law of which it is incorporated.

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: ______ Vice Chairman: Address: _____ Director: B. OFFICERS Michael Delzer President: 100 Fillmore St. Suite 500 Address: _ Denver, CO 80206 Same as Above Vice President: _____ Address: _____ Same as Above Secretary: Address: _ Same as Above Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

(Typed or printed name and capacity of person signing application)

Michael Delzer, President

13. ____

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I. Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

IRONWOOD FINANCIAL SERVICES, INC.

is a

Corporation

formed or registered on 01/25/2002 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20021027273.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 06/24/2019 that have been posted, and by documents delivered to this office electronically through 06/25/2019 @ 15:43:56.

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 06/25/2019 @ 15:43:56 in accordance with applicable law. This certificate is assigned Confirmation Number 11651692



Secretary of State of the State of Colorado

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.yos.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".