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SEGRETARY OF STATE
FALLAMASSEE, FLORIBA

SEP 30 2015 S. YOUNG

COVER LETTER

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SUBJE		Gen Enterprises, L	LC						
00202	_		Name of	Limited Liability	Company				
			reign Limited Liability Comp d to register the above refer						
Please	return a	ll correspondence o	concerning this matter to the	following:					
		Michael Grisw	old						
			N	ame of Person					
		nGen Enterpris	es, LLC						
			Fi	rm/Company					
		5943 S. Hill St							
		**************************************		Address					
		Littleton, CO	30120						
			City/S	tate and Zip Code	;				
		ngen.investments	s@gmail.com				超過	क	
			E-mail address: (to be used	for future annua	report not	ification)	至四	SEP	1.1
For fur	ther info	rmation concernin	g this matter, please call:				SSE SE	29	
	Mike	Griswold		720 at (486-92	33	mar Ta	2	
		Name o	of Contact Person	Area Code	Day	time Telephone Numb		ի: Օփ	
	Divisi Regist P.O. E	on of Corporations tration Section Box 6327 assee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle ee, FL 32301	300),	
Enclose		heck for the follow 5.00 Filing Fee	ing amount: \$\mathbb{\mtx}\m{\mtx}\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	□ \$155.00 Filid Certified Copy	ng Fee &	□ \$160.00 Filing Fe		icate	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN FLORIDA IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: nGen Enterprises, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") State of Colorado (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) No transactions have occurred (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) PO Box 11750 Denver, 80211 (Street Address of Principal Office) 5943 S. Hill St. Littleton, CO 80120 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) REGISTERED AGENTS INC. Name: 3030 N. Rocky Point Drive, STE 150A Office Address: TAMPA Florida 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 Bill Havre/Assistant Secretary/Registered Agents Inc (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Michael Griswold, Managing Member / Principal 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

Signature of an authorized person

Michael Griswold

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE

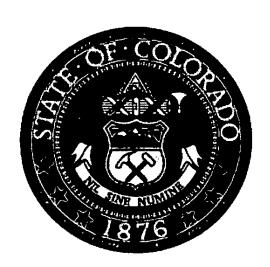
I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

nGen Enterprises, LLC

is a Limited Liability Company formed or registered on 08/18/2014 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 20141498538.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 09/15/2015 that have been posted, and by documents delivered to this office electronically through 09/16/2015 @ 22:12:33.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 09/16/2015 @ 22:12:33 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 9307786.



FILED

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SEPERATY OF STATE
SHAMAN ASSEE, FLORIDA

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 Certificate Confirmation 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 Business Center and select "Frequently Asked Questions."