

ARTICLES OF ORGANIZATION Form 7.80.204.1 revised 11/29/2000

Filing fee: **\$50.00** This document must be typed or machine printed.

If more space is required, continue on attached 8½" x 11" sheet(s).

Deliver 2 copies to: Colorado Secretary of State, Business Division,
1560 Broadway, Suite 200, Denver, CO 80202-5169

Please include a typed or machine printed, self-addressed, envelope.

For filing requirements, see §§ 7-90-301 and 7-80-204, Colorado Revised Statutes

For more information, see the *Citizen's Guide to the Business Division* on our

Web site, www.sos.state.co.us Questions? Contact the Business Division:

voice 303 894 2251, fax 303 894 2242 or e-mail sos.business@state.co.us

ONLY

FILED
DONETTA DAVIDSON
COLORADO SECRETARY OF STATE

20031089968 M
\$ 50.00
SECRETARY OF STATE
03-21-2003 13:05:31

ABOVE SPACE FOR OFFICE USE

The undersigned, a natural person eighteen years of age or older, intending to organize a limited liability company pursuant to § 7-80-203, Colorado Revised Statutes (C.R.S.), delivers these Articles of Organization to the Colorado Secretary of State for filing, and states as follows:

1. The name of the limited liability company is: PEAK FINANCIAL & TAX CONSULTING, LLC
The name of a limited liability company must contain the term "limited liability company", "ltd. liability company", "limited liability co.", or "ltd. liability co." or the abbreviation "LLC" or "L.L.C." §7-90-601(3)(c), C.R.S.

2. If known, The principal place of business of the limited liability company is: _____
6660 DELMONICO DRIVE SUITE D-261 COLORADO SPRINGS CO 80919

3. The name, and the business address, of the registered agent for service of process on the limited liability company are: Name NORSKII INVESTMENTS, LLC; Business Address (must be a street or other physical address in Colorado) _____
6660 DELMONICO DRIVE SUITE D-261 COLORADO SPRINGS CO 80919 If mail is undeliverable to this address, ALSO include a post office box address: _____

4. a. If the management of the limited liability company is vested in managers, mark the box ☐ "The management of the limited liability company is vest in managers rather than members."
The name(s) and business address(es) of the initial manager(s) is(are):
Name(s) _____ Business Address(es) _____

OR

b. If management of the limited liability company is not vested in managers rather than members, The name(s) and business address(es) of the initial member(s) is(are):
Name(s) NORSKII INVESTMENTS, LLC Business Address(es) 6660 DELMONICO DRIVE SUITE D-261 COLORADO SPRINGS CO 80919

5. The address to which the Secretary of State may send a copy of this document upon completion of filing (or to which the Secretary of State may return this document if filing is refused) is: 6660 DELMONICO DRIVE SUITE D-261 COLORADO SPRINGS CO 80919

Organizer [Signature] Signer's Name-printed BARRADA ROBBINS
(individual's signature)

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 _____

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.

Attachment 7

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VF



Colorado Secretary of State

Date and Time: 08/10/2004 09:18 PM

Entity Id: 20031089968

Document number: 20041280115

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Colorado Secretary of State

Business Division

1560 Broadway, Suite 200

Denver, CO 80202-5169

Paper documents must be typed or machine printed.

ABOVE SPACE FOR OFFICE USE ONLY

Annual Report

filed pursuant to §7-90-301, et seq. and §7-90-501 of the Colorado Revised Statutes (C.R.S.)

ID number: 20031089968

Entity name:

PEAK FINANCIAL & TAX CONSULTING, LLC

Jurisdiction under the law of which the
entity was formed or registered:

Colorado

You must complete lines 1 and 2.

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.

1. Name(s) of individual(s) responsible
for the accuracy of report:

Robbins

Barbara

(Last)

(First)

(Middle)

(Suffix)

2. Address(es) of individual(s)
responsible for the accuracy of report:

6660 Delmonico Drive

Suite D-261

(Street name and number or Post Office Box information)

Colorado Springs

CO

80919

(City)

(State)

(Postal/Zip Code)

(Province - if applicable)

(Country - if not 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 ☐ and include an attachment stating the name and address of such individuals.)

- ☐ Mark the box if information requested below is current in the records of the Secretary of State
OR complete Questions 3 through 8.

3. Principal office street address:

6660 DELMONICO DR STE D261

(Street name and number)

COLORADO SPRINGS CO 80919

(City)

(State)

(Postal/Zip Code)

United States

(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 name: (if an individual)

(Last)

(First)

(Middle)

(Suffix)

OR (if a business organization)

NORSKII INVESTMENTS, LLC

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

7. Registered agent street address:

6660 DELMONICO DR STE D261

(Street name and number)

COLORADO SPRINGS CO 80919

(City)

(State)

(Postal/Zip Code)

8. Registered agent 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)

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



Colorado Secretary of State
Date and Time: 05/31/2005 10:36 AM
Entity Id: 20031089968
Document number: 20051215431

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Annual Report

filed pursuant to §7-90-301, et seq. and §7-90-501 of the Colorado Revised Statutes (C.R.S)

ID number: 20031089968

Entity name: PEAK FINANCIAL & TAX CONSULTING, LLC

Jurisdiction under the law of which the
entity was formed or registered: Colorado

You must complete line 1.

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

ROBBINS	BARBARA		
(Last)	(First)	(Middle)	(Suffix)
1440 MAIN ST			
(Street name and number or Post Office Box information)			
WOODLAND PARK	CO	80863	
(City)	(State)	(Postal/Zip Code)	
(Province - if applicable)		(Country - if not 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 ☐ and include an attachment stating the

name and address of such individuals.)

- ☐ **Mark the box** if information requested below is current in the records of the Secretary of State
OR complete Questions 2 through 7.

2. Principal office street address:

6660 DELMONICO DR STE D261

(Street name and number)

COLORADO SPRINGS CO 80919

(City)

(State)

(Postal/Zip Code)

United States

(Province – if applicable)

(Country – if not US)

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(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)

4. Registered agent name: (if an individual)

(Last)

(First)

(Middle)

(Suffix)

OR (if a business organization)

NORSKII INVESTMENTS, LLC

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6660 DELMONICO DR STE D261

(Street name and number)

COLORADO SPRINGS CO 80919

(City)

(State)

(Postal/Zip Code)

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