

Colorado Secretary of State Date and Time: 02/19/2009 02:16 PM ID Number: 20091103588

\$50.00

Document number: 20091103588 Amount Paid: \$50.00

ABOVE SPACE FOR OFFICE USE ONLY

Articles of Incorporation for a Nonprofit Corporation

filed pursuant to § 7-122-101 and § 7-122-102 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name for the nonprofit corporation is

Document must be filed electronically.

Paper documents will not be accepted.

To access other information or print copies of filed documents, visit <u>www.sos.state.co.us</u> and select Business Center.

Document processing fee

Fees & forms/cover sheets

are subject to change.

Westgate Community School

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

2. The principal office address of the nonprofit corporation's initial principal office is

Street address	13925 Harrison Street	
	(Street n	number and name)
	Thornton	CO 80602
	(City)	(State) (ZIP/Postal Code)
	(Province – if applicable)	(Country)
Mailing address	P.O. Box 2045	
(leave blank if same as street address)	(Street number and name or Post Office Box information)	
	Broomfield	CO 80038-2045
	Broomfield (City)	CO 80038-2045 United States (ZIP/Postal Code)

3. The registered agent name and registered agent address of the nonprofit corporation's initial registered agent are

Name (if an individual)	Johnston	Chris		
OR	(Last)	(First)	(Middle)	(Suffix)
(if an entity) (<i>Caution:</i> Do not provide both a	n individual and an entity name.)			
Street address	13925 Harrison	Street		
		(Street number and name)		
	Thornton	СО	80602	
	(City)	(State)	(ZIP Code)	

ARTINC_NPC

Mailing address (leave blank if same as street address)	(Street number and name or Post Office Box information)				
		СО			
	(City)	(State)	(ZIP Code)		
(The following statement is adopted by marking the The person appointed as registered		nted to being so appo	ointed.		
4. The true name and mailing address of t	he incorporator are				
Name (if an individual)	Clark	Carleen	Т		
OR	(Last)	(First)	(Middle)	(Suffix)	
(if an entity) (<i>Caution:</i> Do not provide both an individ	dual and an entity name.)			······	
Mailing address	1125 Seventeenth Street				
	Suite 2100 ^{Street number and name or Post Office Box information)}				
	Denver	CO	80202		
	(City)	United St	ates (ZIP/Postal Co	de)	
	(Province – if applicat	ble) (Country)			
 (If the following statement applies, adopt the corporation has one or more additional incorporator are stated 5. (If the following statement applies, adopt the statem reference) The nonprofit corporation will have 	e additional incorporate ed in an attachment.		· · · · · · · · · · · · · · · · · · ·	of each	

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

Provisions regarding the distribution of assets on dissolution are included in an attachment.

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

Clark	Carleen	Т	
1125 Seventeenth S	(First) Street	(Middle)	(Suffix)
(Street number of Suite 2100	and name or Post Office	e Box information)	
Denver	CO	80202	
(City)	United Sta	(ZIP/Postal Co	ode)
(Province – if applicable)	(Country)		

(If the following statement applies, adopt the 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).

Click the following links to view attachments

Attachment 1 Additional Provisions to Articles of Incorp.