

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

Statement of Foreign Entity Authority

with Document # 20141290685 of

Diamond T Services, Inc.

Wyoming Foreign Corporation

(Entity ID # 20141290685)

consisting of 3 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 10/28/2024 that have been posted, and by documents delivered to this office electronically through 10/29/2024 @ 12:38:09.

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 10/29/2024 @ 12:38:09 in accordance with applicable law. This certificate is assigned Confirmation Number 16516391.



A handwritten signature in blue ink that reads "Jena Griswold".

Secretary of State of the State of Colorado

*****End of Certificate*****

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Colorado Secretary of State
Date and Time: 05/06/2014 11:24 AM
ID Number: 20141290685
Document number: 20141290685
Amount Paid: \$100.00

ABOVE SPACE FOR OFFICE USE ONLY

Statement of Foreign Entity Authority

filed pursuant to § 7-90-803 of the Colorado Revised Statutes (C.R.S.)

1. The entity ID number, the entity name, and the true name, if different, are

Entity ID number 20141290685
(Colorado Secretary of State ID number)

Entity name Diamond T Services, Inc.

True name _____
(if different from the entity name)

2. The form of entity and the jurisdiction under the law of which the entity is formed are

Form of entity Foreign Corporation

Jurisdiction Wyoming

3. The principal office address of the entity's principal office is

Street address 103 S. 6th East
(Street number and name)

Ste. B

Riverton WY 82501
(City) (State) (ZIP/Postal Code)

United States
(Province – if applicable) (Country)

Mailing address 112 N. Rubey Drive
(leave blank if same as street address) (Street number and name or Post Office Box information)

Ste. 101

Golden CO 80403
(City) (State) (ZIP/Postal Code)

United States
(Province – if applicable) (Country)

4. The registered agent name and registered agent address of the entity's registered agent are

Name
(if an individual) Ingalls Vanessa Elaine
(Last) (First) (Middle) (Suffix)

or

(if an entity) _____

(Caution: Do not provide both an individual and an entity name.)

Street address

7736 Rogers Street

(Street number and name)

Arvada

(City)

CO

(State)

80007

(ZIP Code)

Mailing address

(leave blank if same as street address)

112 N. Rubey Drive

(Street number and name or Post Office Box information)

Ste. 101

Golden

(City)

CO

(State)

80403

(ZIP Code)

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

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

5. The date the entity commenced or expects to commence transacting business or conducting activities in Colorado is 04/01/2014.
(mm/dd/yyyy)

6. (If applicable, adopt the following statement by marking the box and include an attachment.)

☐ This document contains additional information as provided by law.

7. (**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)

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8. The true name and mailing address of the individual causing the document to be delivered for filing are

Estrada

(Last)

Yolanda

(First)

(Middle)

(Suffix)

112 N. Rubey Drive

(Street number and name or Post Office Box information)

Ste.101

Golden

(City)

CO

(State)

80403

(ZIP/Postal Code)

United States

(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.

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