DR 8439 (09/19/19)
COLORADO DEPARTMENT OF REVENUE

Departmental Use Only

Liquor Enforcement Division (303) 205-2300 Permit										
In order to qualify for a Special Events Permit, You Must Be a Qualifying Organization Per 44-5-102 C.R.S. and One of the Following (See back for details.)										
Social Athletic Fraternal Chartered B	Branch, Lodge or Chapter ganization or Society		Philanthropi Political Car Municipality		ities		R			
LIAB Type of Special Event Applicant is Applying for:				DO NOT WRITE IN THIS SPACE						
2110 Malt, Vinous And Spirit	\$25.00 Per Day Liquor Permit Number									
2170 Fermented Malt Bevera	\$10.00 Per [	\$10.00 Per Day								
Name of Applicant Organization or Political Candidate     State Sales Tax Number (Required)									er (Required)	
Mailing Address of Organization or Political Candidate (include street, city/town and ZIP)      Address of Place to Have Special Event (include street, city/town and ZIP)										
9996 US HUY 50				FUNSTREET ARCADE						
SAUDA CO 81201 SALIBA CO 81201										
4. Authorized Representative of Qualifying Organization or Political Candidate SCOTTY HUGHES					Date of Birth		719		1657	
Authorized Representative's Mailing Ad	Idress (if different than addres	ss provided in Q	uestion 2.)							
5. Event Manager SCOTTY HOG	ITES				Date of Birth	72 P	hone Numb		1657	
Event Manager Home Address (Street.					Email Address	of Event	t Manager	401	1001	
6. Has Applicant Organization or Political Candidate been   7. Is the premises for which your event is to be held currently licensed under the   Colorado Liquor or Beer codes?										
No Yes How many days? Colorado Liquor or Beer codes?										
8. Does the Applicant Have Possessio		e Use of The Pre								
List Below the Exact Date(s) for Which Application is Being Made for Permit										
Hours From & PM.m. Hour		Date Hours From		Date Hours	From	₽m,	Date	From	.m.	
To 12 A .m.	To "m.	То		ama	То	.m.		То	,m,	
Date Hours From .m. Hour	_	Date		Date	F	Scarce	Date	_		
To imi	rs From .m.	Hours From To		m Hours	From To	.m.	Hours	From	.m.	
Date Date		Date		Date		21.6	Date	10	5008	
Hours From m. Hour		Hours From		m. Hours	From	×m.	Hours	From	,m.	
To im.	To "m.	То		.m.	То	,m,		То	sma	
Oath of Applicant I declare under penalty of perjury in the second degree that I have read the foregoing application and all attachments thereto, and that all information therein is true, correct, and complete to the best of my knowledge.										
				PRESIDENT 3/3/22						
Report and Approval of Local Licensing Authority (City or County)  The foregoing application has been examined and the premises, business conducted and character of the applicant is satisfactory, and we do report that such permit, if granted, will comply with the provisions of Title 44, Article 5, C.R.S., as amended.  THEREFORE, THIS APPLICATION IS APPROVED.										
Local Licensing Authority (City or County)  City  County										
Signature				Date						
DO NOT WRITE IN THIS SPACE - FOR DEPARTMENT OF REVENUE USE ONLY										
Liability Information										
License Account Number	Liability Date	Liability Date S					Total			
				\$						

## 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,

Bring Everyone Through the Crisis of Housing

is a

#### Nonprofit Corporation

formed or registered on 12/11/2021 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 20218162774.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 12/09/2021 that have been posted, and by documents delivered to this office electronically through 12/11/2021 @ 09:52:24.

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 12/11/2021 @ 09:52:24 in accordance with applicable law. This certificate is assigned Confirmation Number 13645926



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, <a href="http://www.sos.state.co.us/biz/CertificateSearchCriteria.do">http://www.sos.state.co.us/biz/CertificateSearchCriteria.do</a> 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, <a href="http://www.sos.state.co.us/click">http://www.sos.state.co.us/click</a> "Businesses, trademarks, trade names" and select "Frequently Asked Questions."

# FUN STREET ARCADE

