## 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

Articles of Incorporation

with Document # 20221584287 of
KORTHO TECHNOLOGY LABORATORY FOUNDAION

Colorado Nonprofit Corporation

(Entity ID # 20221584287)

consisting of 3 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 07/12/2024 that have been posted, and by documents delivered to this office electronically through 07/17/2024 @ 04:15:08.

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 07/17/2024 @ 04:15:08 in accordance with applicable law. This certificate is assigned Confirmation Number 16212725



Secretary of State of the State of Colorado

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Colorado Secretary of State

Date and Time: 06/14/2022 02:33 AM

ID Number: 20221584287

Document number: 20221584287

Amount Paid: \$50.00

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## **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	KORTHO TECHNOLOGY LABORATORY FOUNDAION					
(Caution: The use of certain terms or abbre	viations are restricted by law.	Read instructions fo	er more information.)			
2. The principal office address of the nor	nprofit corporation's initia	l principal office i	is			
Street address	145 Cornell St					
	(Street number and name)					
	Colorado Springs	СО	80911			
	(City)	(City) (State) (ZIP/Post United States				
	(Province – if applicable)					
Mailing address						
Mailing address (leave blank if same as street address)	(Street number and name or Post Office Box information)					
	(City)	(State)	(ZIP/Postal Code)			
	(Province – if applicable)	(Country	y)			
3. The registered agent name and registe are	red agent address of the no	onprofit corporation	on's initial registered ager			
Name (if an individual)	LIANG	LIANHUA				
OR	(Last)	(First)	(Middle) (Suffi.			
(if an entity) (Caution: Do not provide both an indiv	idual and an entity name.)					
Street address	145 Cornell St					
	(Street number and name)					
	Colorado Springs		80911			
	(City)	(State)	(ZIP Code)			

	ess) (Street number	(Street number and name or Post Office Box information)				
	(City)	(State)	(ZIP Code	)		
Call and the second in the second	in the Levy					
following statement is adopted by marki  The person appointed as regis		ented to being so app	ointed.			
e true name and mailing addres	ss of the incorporator are					
Name	LIANIO					
(if an individual)	LIANG (Last)	LIANHUA (First)	(Middle)	(Suffix		
OR	(Lust)	(1 1131)	(muue)	(Зијји		
(if an entity)	individual and an antity name)					
(Caution: Do not provide both an	145 Cornell St					
Mailing address		nber and name or Post Offi	ice Box information)			
	Colorado Springs	(State)	80911 (ZIP/Postal C	ode)		
	· • ·	United S	tates .			
	(Province – if applica	able) (Country)	,			
additional incorporator are	e stated in an attachment.		J	of each		
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7. (If the following statement applies, adopt the statem	ent by marking the box and inclu	de an attachment.)				
This document contains additional	information as provided b	by law.				
8. (Caution: <u>Leave blank</u> if the document does r significant legal consequences. Read instruct		ate. Stating a delaye	ed effective date has			
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	LIANG	LIANHUA				
	145 Cornell St	(First)	(Middle)	(Suffix)		
		and name or Post Offi	d name or Post Office Box information)			
	Colorado Springs	CO	80911			
	(City)	(State) United St	(ZIP/Postal Co	ode)		
	(Province – if applicable)					
(If the following statement applies, adopt the  This document contains the true not causing the document to be delivered.)	ame and mailing address			ıls		
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