DISTRICT COURT, COUNTY OF DOUGLAS, STATE COLORADO 4000 Justice Way, Suite 2009 Castle Rock, CO 80109 720-437-6200	OF							
IN RE JORDAN CROSSING METROPOLITAN DISTRICT								
MaryAnn M. McGeady	▲ COURT USE ONLY ▲							
Suzanne M. Meintzer								
McGEADY BECHER P.C. 450 E. 17 th Avenue, Suite 400 Denver, Colorado 80203	Case Number: 2006CV626							
Phone: (303) 592-4380	Div.: 1 Ctrm.:							
Fax: (303) 592-4385 E-mail: mmcgeady@specialdistrictlaw.com	Div 1 Cum							
E-mail: mmcgeady@specialdistrictlaw.com smeintzer@specialdistrictlaw.com								
Atty. Reg. #: 12417								
36795								
OATH OF DIRECTOR								
I, James E. Marshall, do SWEAR AFFIRM that I will support the Constitution of the United States, the Constitution of the State of Colorado, and the laws of the State of Colorado, and will faithfully perform the duties of the office of director of the Jordan Crossing Metropolitan District upon which I am about to enter to the best of my ability. Signed: Name: James E. Marshall 9591 East Hidden Hill Lane Lone Tree, CO 80124								
Subscribed and sworn affirmed to before me this	_day of, 2018.							
Ву:								
County the Boar	authorized to administer oaths, i.e. Clerk and Recorder, Chairman of rd of Directors, or any other person red to administer oaths)							

STATE OF COLORADO COUNTY OF <u>ARAPAHOE</u>)) ss. .)	
Subscribed and sworn affirmed t	o before me this <u>/47/4</u> da	ay of <u>MAY</u> , 2018.
(Notary's official signature)		PAT-CARTWRIGHT NOTARY PUBLIC STATE OF COLORADO
(Commission Expiration)		NOTARY ID 20114078117 MY COMMISSION EXPIRES 12/09/2019 NOTARY SEA

CERTIFICATE

ELECTION

member of the Board of Directors of the **Jordan Crossing Metropolitan District** at the election held May 8, 2018. This certifies that James E. Marshall was elected to serve a four-year term as a

Designated Election Official





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/29/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

th	nis certificate does not confer rights t	to the	cert	ificate holder in lieu of su).	- Toquiro un onus			atomone on
	DUCER				CONTAC NAME:				v		
T. C	harles Wilson Insurance Service			!	PHONE (A/C, No, Ext): (303) 368-5757 FAX (A/C, No): (303) 368-5863						68-5863
384 Eng	Inverness Parkway Suite 170 lewood, CO 80112			!	E-MAIL ADDRESS: info@wilsonins.com						•• •••
	,			!	ADDIL						NAIC#
				!	INSURER(S) AFFORDING COVERAGE NAIC # INSURER A : RLI Insurance Company						NAIO#
INSU	(PED										
11100	Jordan Crossing Metropolit				INSURER B:						
	c/o Special District Manage 141 Union Blvd.	ment	Serv	rices, Inc.	INSURER C:						
	Suite 150			!	INSURER D:						
	Lakewood, CO 80228			!	INSURER E :						
20					INSURER F:						
			Colored Combined Co.	E NUMBER:	· · · · · · · · · · · · · · · · · · ·			REVISION NUM		POI	*****
IN C	HIS IS TO CERTIFY THAT THE POLICI IDICATED. NOTWITHSTANDING ANY F ERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH	REQUI PER POLI	IREMI RTAIN, ICIES.	IENT, TERM OR CONDITION , THE INSURANCE AFFORD . LIMITS SHOWN MAY HAVE	N OF A	ANY CONTRAC	CT OR OTHER IES DESCRIB	R DOCUMENT WIT	TH RESPE	CT TO	WHICH THIS
INSR LTR		ADDL	SUBR	POLICY NUMBER			POLICY EXP (MM/DD/YYYY)		LIMIT	s	
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								MED EXP (Any one p		\$	
								PERSONAL & ADV I		\$	_
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	POLICY PRO- LOC									\$	
	OTHER:							PRODUCTS - COWN	70F AGG	\$	
	AUTOMOBILE LIABILITY	+	+					COMBINED SINGLE (Ea accident)	LIMIT	\$	
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	OWNED SCHEDULED AUTOS ONLY									\$	
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	AUTOS ONLY AUTOS ONLY							(Per accident)		\$	
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WORKERS COMPENSATION AND EMPLOYERS' LIABILITY											
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. EACH ACCIDEN		\$	
	If ves. describe under							E.L. DISEASE - EA E			
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	0 100. 25			20		THIS IIME IS		Dolla / Illia			10,00
Publ 1 Tre	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC ic Official Position Schedule Bond Pasurer @ \$5,000 ard Members @ \$1,000 each	LES (A	ACORE) 101, Additional Remarks Schedu	ile, may b	e attached if mor	'e space is requir	ed)			
CERTIFICATE HOLDER					CANC	CELLATION					
OLI	THIOATE HOLDER				CANC	LLLATION					
Colorado Department of Local Affairs Division of Local Government-Special Districts 1313 Sherman St., Rm 521 Denver, CO 80203				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
				AUTHORIZED REPRESENTATIVE							
					Shelly Cardillo						

AFFIDAVIT OF PUBLICATION

State of Colorado County of Douglas

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This Affidavit of Publication for the Douglas County News Press, a weekly newspaper, printed and published for the County of Douglas, State of Colorado, hereby certifies that the attached legal notice was published in said newspaper once in each week, for 1 successive week(s), the last of which publication was made the 19th day of April A.D., 2018, and that copies of each number of said paper in which said Public Notice was published were delivered by carriers or transmitted by mail to each of the subscribers of said paper, according to their accustomed mode of business in this office.

for the Douglas County News Press

State of Colorado)

County of Arapahoe

)ss

The above Affidavit and Certificate of Publication was subscribed and sworn to before me by the above named Gerard Healey, publisher of said newspaper, who is personally known to me to be the identical person in the above certificate on 19th day of April A.D., 2018. Gerard Healey has verified to me that he has adopted an electronic signature to function as his signature on this document.

LINDSAY L NICOLETTI Notery Public State of Colorado Notery ID # 20134073610 My Commission Expires 02-22-2022

My Commission Expires 02/22/22

Public Notice

NOTICE OF CANCELLATION and CERTIFIED STATEMENT OF RESULTS §1-13.5-513(6), 32-1-104, 1-11-103(3) C.R.S.

NOTICE IS HEREBY GIVEN by the Jordan Crossing Metropolitan District, Douglas County, Colorado, that at the close of business on the sixty-third day before the election, there were not more candidates for director than offices to be filled, including candidates filing affidavits of intent to be write-in candidates; therefore, the election to be held on May 8, 2018 is hereby canceled pursuant to section 1-13.5-513(6) C.R.S.

The following candidates are declared elected for the following terms of office:

Thomas J. Brinkman II Second Regular Election, May 2022 Scott Marshall Second Regular Election, May 2022 James E. Marshall Second Regular Election, May 2022

/s/ Ann E. Finn (Designated Election Official)

Contact Person for the District: Ann E. Finn
Telephone Number of the District: 303-987-0835
Address of the District:
141 Union Boulevard, Suite 150,
Lakewood, CO 80228
District Facsimile Number: 303-987-2032
District Email: afinn@sdmsi.com

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First Publication: April 19, 2018
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Notary Public