	·	FILED FOR RECORD
	2005 001144	2005 DEC 20 AM II: 59
FORMATION REQUES	MICHAEL A. BROWN RECORDER	
LOW INSTRUCTIONS (front and b INAME & PHONE OF CONTACT (option Amy 365-4092 OR KO PRETURN TO: (Name and Address)	ial] FILING OFFICE ACCT#	STATE OF INDIANA LAKE COUNTY FILED FOR RECORD
(Name and Address)	2005 001144	2005 DEC 20 AM 11: 59
Northwe 9505 G	aper Chase of est Indiana, Inc. Genevieve Drive ohn, IN 46373	MICHAEL A. BROWN RECORDER
DEPTOR NAME to be accepted in		ABOVE SPACE IS FOR FILING OFFICE USE ONLY
1acorganization's name Backen	Colorado Gaming LLC	
16-INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME SUFFIX
Record Number	Date Record Flled (if required) Type of Record	and Additional Identifying Information (if required)
	40.41	
	Mother	ng .
		0
ADDITIONAL SERVICES:		
1		1 1
	-1	date: 18/19/05

4a Pick Up
4b Other

40DELIVERY INSTRUCTIONS (request will be completed and mailed to the address shown in item 8 unless otherwise instructed here):

Specify desired method here (if available from this office); provide delivery information (e@@delivery service's name, addressee's account # with delivery service, addressee's phone #, etc@