F 2300001438

(Requestor's Name)	
(Address)	
` ,	
	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	ıs
	<u> </u>
Special Instructions to Filing Officer	

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COVER LETTER

_	stration Section ion of Corporations				
SUBJECT:	ASPEN GROVE SERVIC	ING CORPORA	ATION		
SUBJECT	Name	of corporation	- must include suffix		
Dear Sir or M	ladam:				
*Certificate o	"Application by Foreign Conference," or "Certificate ced foreign corporation to t	of Good Stand	ding" and check are subm		
Please return	all correspondence concern	ing this matter	to the following:		
Dennis Lanni				2023FEB	
		Name of I	Person		
Aspen Grove	Servicing Corporation				
		Firm/Com	pany	PM 3	
2398 Fair Oa	ks Blvd. #7			7 w	
		Addre	rss	04 A.E.	
Sacramento.	California 95825				
		City/State ar	nd Zip code		
hello@aspen	-				
	E-mail addres	s: (to be used to	or future annual report no	tification)	
For further in	formation concerning this n	natter, please c	all:		
Shannon Wir	nford	916 241-3558			
Nam	e of Person	Area Code	Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Sec Division of Cor P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	check for the following am teck payable to: FLORIDA D ing Fee	EPARTMENT ig Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy	

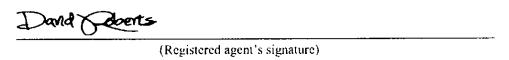
APPEICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

ASPEN GROV	VE SERVICING CORPORATION				
	corporation; must include "INCORPORATED. Corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORAT	TON."		
AGS CORPO	RATION				
(If name unavail	lable in Florida, enter alternate corporate name	adopted for the purpose of transa	cting busine	ss in F	lorida)
, CALIFORNIA	3	n/a			
(State or count	tate or country under the law of which it is incorporated) (FEI number, if applicable))		
4. 05/17/2022	5.	n/a			
· · · · · · · · · · · · · · · · · · ·	e of incorporation)	(Date of duration, if ot	her than per	octual)	
6. <u>n/a</u>					
	(SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) 502, F.S., to determine penalty lia	ability)	2023 FEB	
7. <u>2398 Fair Oaks</u>	Blvd. #7 Sacramento, CA 95825		13	77	177
same	(Principal off	fice <u>street</u> address)		<u>-</u> B 17	===
	(Current maili	ng address, if different)	.333. 15.23.	PM 3: 04	
8. Name and stre	ct address of Florida registered agent: (P.	O. Box NOT acceptable)		0	
Name:	Registered Agents Inc				
Office Address:	7901 4th St N STE 300				
	St. Petersburg	. Florida <u>33702</u>			
	(City)	(Zip code)			

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTORS	2 (
□Chairman	Name:	□Chairman	Name: Deanna Montgomery
□Vice Chairman	Address:	□Vice Chairman	Address: 2398 Fair Oaks Blvd. #7
Director	Sacramento, CA 95825	Director	Sacramento, CA 95825
President		□President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	□Other	□Other
□Chairman	Name:	□ Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		Director	
□President		□President	2023
□Vice President		□Vice President	3 FE T
☐ Secretary	□Treasurer	□ Secretary	Treasarer 7770
□Other		⊡Other	Cother C
			3: 04 3: 74.E
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	□ Secretary	☐ Treasurer
Other		Other	Other
Important Notice: individuals may be	Use an attachment to report more than six (6). The attachment to the index when filing your Florida Departm Signature of Director	ent of State Annual R	eport form.
she is aware that fa s.817.155, F.S.	etor signing this document (and who is listed in numbalse information submitted in a document to the Depar	er 11 above) affirms the	nat the facts stated herein are true and that he or ites a third degree felony as provided for in
13. Deanna Mo	ntgomery		



I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: Aspen Grove Servicing

Entity No.: 5080858 **Registration Date:** 05/17/2022

Entity Type: Stock Corporation - CA - General

Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 12, 2023.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 081955326

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.