FILED

## 2002 UNIFORM BUSINESS RÉPORT (UBR)

## Apr 22, 2002 8:00 am Secretary of State DOCUMENT # L01000017166 1. Entity Name 04-22-2002 90237 044 \*\*\*\*50 00 ASPEN ENERGY VENTURES, LLC Principal Place of Business Mailing Address 860 US HIGHWAY ONE 860 US HIGHWAY ONE SUITE 108 SUITE 108 NORTH PALM BEACH FL 33408 NORTH PALM BEACH FL 33408 2. Principal Place of Business Mailing Address 50 50 5. 5. one Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 363 303 City & State City & State 4. FEI Number Applied For *supiter* <u>65-</u> Not Applicable Country A Zip 33477 Country \$5.00 Additional 5. Certificate of Status Desired U5 A Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KEVIN HESSEE CORPORATE CREATIONS NETWORK INC. Street Address (P.O. Box Number is Not Acceptable) 941 FOURTH STREET #200 MIAMI BEACH FL 33139 Jupiter 8. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida red Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. MGR ☐ Addition TITLE ☐ Delete TITLE Hessep, Kevin L NAME HESSEE, KEVIN L NAME 50 s. Us Huyone #303 STREET ADDRESS STREET ADDRESS 860 US HIGHWAY ONE suriter, 7L 33477 CITY-ST-ZIP CITY-ST-ZIP **NORTH PALM BEACH FL 33408** TITLE MGR Delete TITLE ☐ Addition Hessee CLAUSIA J 50 S. US Huy one # 303 HESSEE, CLAUDIA J NAME NAME STREET ADDRESS STREET ADDRESS 860 US HIGHWAY ONE CITY-ST-ZIP CITY-ST-7/P NORTH PALM BEACH FL 33408 TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

WE OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE