

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations Fax Number : (850)205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC. Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

## LIMITED LIABILITY COMPANY

## THE ASPEN GROUP, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is:

The Aspen Group, LLC

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

5851 Northeast 21" Lane Fort Lauderdale, Florida 33308

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE:

The name and the Florida Street address of the registered agent are;

Douglas Bates, Esg. 2727 East Oakland Park Boulevard Fort Lauderdale, Florida 33306

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my cluties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

ARTICLE VII - MANAGEMENT (Check If applicable)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

Signatury Ö

or an authorized representative of a member. ne mber

(In accordance with section 608.408(3), Florida Standas, the execution of this document constitutes on alternation under the permittee of perjury that the facts stated herein are true.

KATHLEEN . L. GIES Typed or printed name of signee

Executed this twenty-fourth (24th) day of October, 2001.