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ASPEN CAPITAL MANAGEMENT, LLC
A SEC Registered Investment Advisor

FILED

2005 APR 28 P 1:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 27, 2005

Florida Department of State
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

Sir:

Attached is our application for Articles of Organization and Designation of Registered Agent along with our check of \$160.00 as required for filing fees and certificates.

Regards,

Jamison Savage
Managing Director

JSS/mmc

Encl

TRANSMITTAL LETTER

FILED

TO: Registration Section
Division of Corporations

2005 APR 28 P 1:42

SUBJECT: Aspen Capital Group, LLC
(Name of Limited Liability Company)

CLERK OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jamison Savage
(Name of Person)

Aspen Capital Group, LLC
(Firm/Company)

711 5th Avenue South, Suite 212
(Address)

Naples, FL 34102
(City/State and Zip Code)

For further information concerning this matter, please call:

Jamison Savage at (239) 325-2200
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|--|

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Aspen Capital Group, LLC

ARTICLE II - Address:

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

Principal Office Address:

711 5th Avenue South, Suite 212
Naples, FL 34102

Mailing Address:

711 5th Avenue South, Suite 212
Naples, FL 34102

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Jamison Savage

Name

711 5th Avenue South, Suite 212

Florida street address (P.O. Box **NOT** acceptable)

Naples 34102

FL

City, State, and Zip

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 duties, 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

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

FILED

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGRM

Jamison Savage

711 5th Avenue South, Suite 212

Naples, FL 34102

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jamison Savage

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent**
- \$ 30.00 Certified Copy (Optional)**
- \$ 5.00 Certificate of Status (Optional)**