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ACCOUNT NO. : 072100000032

REFERENCE: 961377 5059367

Or Moi- O PHID: 19

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE: November 8, 2004

ORDER TIME: 9:27 AM

ORDER NO. : 961377-005

CUSTOMER NO: 5059367

CUSTOMER: Ms. Debra A. Mcdonald

The Broe Companies, Inc.

4th Floor

252 Clayton Street Denver, CO 80206

## FOREIGN FILINGS

NAME: ASPEN RETIREMENT HOLDINGS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

\_\_\_\_\_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER:



## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

١.	Aspen Retirement Holdings, LLC
- •	(Name of Foreign Limited Liability Company)
٠	Colorado 3. 42-1541909
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	06/21/2002 5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
5.	November 5, 2004
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	252 Clayton Street, 4th Floor
	Denver, CO 80206
	(Street Address of Principal Office)
8.	If limited liability company is a manager-managed company, check here 🗹
9.	The name and usual business addresses of the managing members or managers are as follows:
	Pat Broe 252 Clayton Street, 4th Floor, Denver, CO 80206
	Robert J. Jacobs 252 Clayton Street, 4th Floor, Denver, CO 80206
	Charles B. Wolfe 252 Clayton Street, 4th Floor, Denver, CO 80206
th	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in ejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)
1 1	Nature of business or purposes to be conducted or promoted in Florida:
	Assisted Living Facilities
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
	Robert J. Jacobs
	Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	of the Limited Liability Con	mpany is:			
Aspen Retirem	nent Holdings, LLC				
2. The name	and the Florida street addre	ess of the registered agent and office are:			
	Corporation Service Company				
		(Name)	<del></del>		
1201 Hays Street					
	Tallahassee	FL 32301-2525			
		City/State/Zip			
liability compo agent and agr relating to the	any at the place designated in ree to act in this capacity. I fi e proper and complete perform	nd to accept service of process for the above in this certificate, I hereby accept the appoi further agree to comply with the provisions rmance of my duties, and I am familiar with gent as provided for in Chapter 608, Florida	ntment as registered of all statutes and accept the		

\$ 100.00 Filing Fee for Application

\$ 30.00 Certified Copy (optional)

\$ 25.00 Designation of Registered Agent

5.00 Certificate of Status (optional)