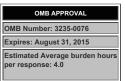
FORM D

Notice of Exempt Offering of Securities

• Yet to Be Formed

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C.



1. Issuer's Identity		
CIK (Filer ID Number)	Previous Name(s) 🔽 None	Entity Type
0001487198	Elite Nutritional Brands,	• Corporation
Name of Issuer	Hidden Ladder, Inc.	C Limited Partnership
ASPEN GROUP, INC.		C Limited Liability Company
Jurisdiction of Incorporation/Organization		C General Partnership
DELAWARE		C Business Trust
Year of Incorporation/Organizat	ion	C Other
 Over Five Years Ago 		
• Within Last Five Years (Specify Year)		

2. Principal Place of Business and Contact Information

Name of Issuer			
ASPEN GROUP, INC.			
Street Address 1		Street Address 2	
276 FIFTH AVENUE		SUITE 505	
City	State/Province/Country	y ZIP/Postal Code	Phone No. of Issuer
NEW YORK	NEW YORK	10001	646-448-5144

3. Related Persons

Last Name	First Name	Middle Name
Mathews	Michael	
Street Address 1	Stree	et Address 2
276 Fifth Avenue	Sui	ite 505
City	State/Province/Country	ZIP/Postal Code
New York	NEW YORK	10001
Relationship: Exe	cutive Officer D	irector Promoter

Clarification of Response (if Necessary)

Last Name		First Name		Middle Name
LaVay		Matthew		
Street Address 1			Street Address 2	
276 Fifth Avenue			Suite 505	
City		State/Province/C	ountry	ZIP/Postal Code
New York		NEW YORK		10001
Relationship:	Execut	ive Officer	Director	Promoter

Clarification of Response (if Necessary)

Last Name			First Name		Middle Name
Alessi			Robert		
Street Address 1				Street Address 2	2
276 Fifth Avenue				Suite 505	
City			State/Province/	Country	ZIP/Postal Code
New York			NEW YORK		10001
[r]	1				
Relationship:		Execut	ive Officer	Director	Promoter
Clarification of Response	e (if N	ecessary)		
Last Name			First Name		Middle Name
St. Arnauld]	Cheri		
Street Address 1			<u></u>	Street Address 2	<u></u> 2
276 Fifth Avenue				Suite 505]
City			State/Province/	Country	ZIP/Postal Code
New York			NEW YORK	•	10001
[
Relationship:		Execut	ive Officer	Director	Promoter
Last Name			First Name		Middle Name
Wendolowski			Gerard		
Street Address 1				Street Address 2	2
276 Fifth Avenue				Suite 505	
City			State/Province/	Country	ZIP/Postal Code
New York			NEW YORK		10001
Relationship:		Execut	ive Officer	Director	Promoter
		_		1	A:
Clarification of Response	e (if N	ecessary)		
Last Name			First Name		Middle Name
McNamara			Anne		
Street Address 1			L <u></u>	Street Address 2	2
276 Fifth Avenue				Suite 505]
City			State/Province/	L	ZIP/Postal Code
New York			NEW YORK	-	10001
L					
Relationship:	N	Execut	ive Officer	Director	Promoter
Relationship:				Director	Promoter
				Director	Promoter Middle Name

Street Address 2

Suite 505

Street Address 1

276 Fifth Avenue

City		State/Province/C	Country	ZIP/Pos	stal Code	
New York		NEW YORK		10001		
Relationship:	Executi	ive Officer	Director		Promoter	
Clarification of Respon	se (if Necessary))				
Ĩ		, ,				
Last Name		First Name		Middle	Name	
Kaplan		Andrew]		
Street Address 1			Street Address 2			
276 Fifth Avenue			Suite 505			
City		State/Province/C	Country	ZIP/Pos	stal Code	
New York		NEW YORK		10001		
					hin 32	
Relationship:	Executi	ive Officer	Director		Promoter	
Clarification of Respon	se (if Necessary))				
Last Name		First Name		Middle	Name	
Kass		Douglas]		
Street Address 1		1	Street Address 2			
276 Fifth Avenue			Suite 505			
City	1	State/Province/C	Country	ZIP/Pos	stal Code	
New York		NEW YORK		10001		
L			Director	10001		
New York Relationship:	Executi	NEW YORK	Director		Promoter	
L	·*	ive Officer	Director		Promoter	
Relationship:	·*	ive Officer	Director	10001	Promoter	
Relationship: Clarification of Respon	·*	ive Officer	Director			
Relationship: Clarification of Respon	·*	ive Officer) First Name	Director	Middle		
Relationship: Clarification of Respon Last Name Koehneman	·*	ive Officer	(((((((((((((((((((
Relationship: Clarification of Respon Last Name Koehneman Street Address 1	·*	ive Officer) First Name	Street Address 2			
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue	·*	ive Officer) First Name Michael	Street Address 2 Suite 505	Middle	Name	
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue City	·*	ive Officer) First Name Michael State/Province/O	Street Address 2 Suite 505	Middle] ZIP/Pos		
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue	·*	ive Officer) First Name Michael	Street Address 2 Suite 505	Middle	Name	
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Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue City New York	se (if Necessary)	ive Officer First Name Michael State/Province/C NEW YORK ive Officer	Street Address 2 Stite 505 Country	Middle] ZIP/Pos	Name Ital Code	
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue City New York Relationship:	se (if Necessary)	ive Officer First Name Michael State/Province/C NEW YORK ive Officer	Street Address 2 Stite 505 Country	Middle] ZIP/Pos	Name Ital Code	
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue City New York Relationship: Clarification of Respon	se (if Necessary)	ive Officer) First Name Michael State/Province/C NEW YORK ive Officer)	Street Address 2 Stite 505 Country	Middle] ZIP/Pos] [10001	Name tal Code	
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue City New York Relationship: Clarification of Respon Last Name	se (if Necessary)	ive Officer First Name Michael State/Province/C NEW YORK ive Officer First Name	Street Address 2 Stite 505 Country	Middle] ZIP/Pos	Name tal Code	
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue City New York Relationship: Clarification of Respon Last Name Prince	se (if Necessary)	ive Officer) First Name Michael State/Province/C NEW YORK ive Officer)	Street Address 2 Suite 505 Country Director	Middle] ZIP/Pos] [10001	Name tal Code	
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue City New York Relationship: Clarification of Respon Last Name Prince Street Address 1	se (if Necessary)	ive Officer First Name Michael State/Province/C NEW YORK ive Officer First Name	Street Address 2 Suite 505 Country Director Street Address 2	Middle] ZIP/Pos] [10001	Name tal Code	
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue City New York Relationship: Clarification of Respon Last Name Prince Street Address 1 276 Fifth Avenue	se (if Necessary)	ive Officer First Name Michael State/Province/C NEW YORK ive Officer First Name Joan	Street Address 2 Suite 505 Country Director Street Address 2 Street Address 2 Street Address 2 Street Address 2	Middle ZIP/Pos Middle Middle	Name ital Code Promoter Name	
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue City New York Relationship: Clarification of Respon Last Name Prince Street Address 1 276 Fifth Avenue Clarification of Respon Last Name Prince Street Address 1 276 Fifth Avenue City	se (if Necessary)	First Name First Name State/Province/C First Name Joan State/Province/C	Street Address 2 Suite 505 Country Director Street Address 2 Street Address 2 Street Address 2 Street Address 2	Middle ZIP/Pos Middle ZIP/Pos	Name tal Code	
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue City New York Relationship: Clarification of Respon Last Name Prince Street Address 1 276 Fifth Avenue	se (if Necessary)	ive Officer First Name Michael State/Province/C NEW YORK ive Officer First Name Joan	Street Address 2 Suite 505 Country Director Street Address 2 Street Address 2 Street Address 2 Street Address 2	Middle ZIP/Pos Middle Middle	Name ital Code Promoter Name	
Relationship: Clarification of Respon Last Name Koehneman Street Address 1 276 Fifth Avenue City New York Relationship: Clarification of Respon Last Name Prince Street Address 1 276 Fifth Avenue Clarification of Respon Last Name Prince Street Address 1 276 Fifth Avenue City	se (if Necessary)	First Name First Name State/Province/C First Name Joan State/Province/C	Street Address 2 Suite 505 Country Director Street Address 2 Street Address 2 Street Address 2 Street Address 2	Middle ZIP/Pos Middle ZIP/Pos	Name ital Code Promoter Name	

Last Name	First Name		Middle Name
Rich	Sanford		
Street Address 1		Street Address 2	
276 Fifth Avenue		Suite 505	
City	State/Province/Cour	ntry	ZIP/Postal Code
New York	NEW YORK		10001
Relationship: Execut	tive Officer	Director	Promoter
Clarification of Response (if Necessary	y)		

4. Industry Group

C Agriculture

Banking & Financial Services

- C Commercial Banking
- C Insurance
- C Investing
- C Investment Banking
- C Pooled Investment Fund
- Other Banking & Financial C Services

C Business Services

Energy

- C Coal Mining
- C Electric Utilities
- C Energy Conservation
- C Environmental Services
- C Oil & Gas
- C Other Energy

C Retailing

C Restaurants

Travel

Technology

C Computers

C Telecommunications

C Other Technology

C Airlines & Airports

O Other Travel

C Lodging & Conventions

C Tourism & Travel Services

- C Health Insurance
- C Hospitals & Physicians
 - Pharmaceuticals
- C Other Health Care

Health Care

C

C Biotechnology

- C Manufacturing
 - Real Estate
 - C Commercial
 - C Construction
 - C **REITS & Finance**
 - C Residential
- Other
- C Other Real Estate

0

C

C

5. Issuer Size

- **Revenue Range**
- C No Revenues
- C \$1 - \$1,000,000
- C \$1,000,001 - \$5,000,000
- \$5,000,001 \$25,000,000 C
- \$25,000,001 - \$100,000,000
- C Over \$100,000,000
- C Decline to Disclose
- Not Applicable C

Aggregate Net Asset Value Range

- No Aggregate Net Asset Value 0
 - \$1 \$5,000,000
 - \$5,000,001 \$25,000,000
 - \$25,000,001 \$50,000,000
- 0 \$50,000,001 - \$100,000,000
- C Over \$100,000,000
- C Decline to Disclose
- C Not Applicable

	Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)						
	Rule 504(b)(1) (not (i), (ii) or (iii))	□ Rule 505					
Π	Rule 504 (b)(1)(i)	Rule 506(b)					
	Rule 504 (b)(1)(ii)	Rule 506(c)					
	Rule 504 (b)(1)(iii)	Securities Act Section 4(a)(5)					
		Investment Company Act Section 3(c)					

7. Type of Filing		
New Notice Date of First	Sale 2022-03-14	First Sale Yet to Occur
Amendment		
8. Duration of Offering	g	
Does the Issuer intend this offering to	o last more than one year?	C Yes C No
9. Type(s) of Securitie	es Offered (select all the	at apply)
9. Type(s) of Securitie	es Offered (select all the	at apply)
Pooled Investment Fund	`	at apply)
Pooled Investment Fund Interests	Equity	
Pooled Investment Fund Interests Tenant-in-Common Securities	 Equity Debt Option, Warrant or Other Right Acquire Another Security 	

10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer?

Clarification of Response (if Necessary)

11. Minimum Investment

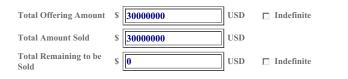
Minimum investment accepted from any outside investor

12. Sales Compensation		
Recipient	Recipient CRD Number	None
(Associated) Broker or Dealer 📃 No	(Associated) Broker or Dealer CRD Number	None
Street Address 1	Street Address 2	
City	State/Province/Country ZIP/Pos	stal Code
State(s) of Solicitation	□ All States	

\$ 5000000

USD

13. Offering and Sales Amounts



\$10,000,000 in convertible notes due March 14, 2027, pays interest monthly of 12% per annum and are convertible into common stock at \$1.00 per share. \$20,000,000 in revolving notes with monthly interest payments of 12% per annum on amounts borrowed.

14. Investors
Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, Number of such non-accredited investors who already have invested in the offering
Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:
15. Sales Commissions & Finders' Fees Expenses
Provide separately the amounts of sales commissions and finders' fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.
Sales Commissions \$ 0 USD 🔽 Estimate
Finders' Fees \$ 0 USD 🔽 Estimate
Clarification of Response (if Necessary)
40 Has of Decession
16. Use of Proceeds
Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.
\$ 0 USD Estimate
Clarification of Response (if Necessary)
Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities
 described and undertaking to furnish them, upon written request, the information furnished to
 offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
ASPEN GROUP, INC.	/s/ Michael Mathews	Michael Mathews	Chief Executive Officer	2022-03-28