

P03000062209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000200890820

04/11/11--01042--013 **35.00

11 MAY -4 PM 3:34

RA Change
05/04/11
DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 26, 2011

ADMINISTRATION
AURORA LIGHTING, INC.
19329 US HIGHWAY 19 NORTH
CLEARWATER, FL 33764

SUBJECT: AURORA LIGHTING, INC.
Ref. Number: P03000062209

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell
Regulatory Specialist II

Letter Number: 511A00010079

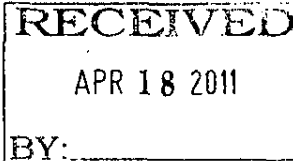
RECEIVED
11 MAY -4 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 14, 2011

ADMINISTRATION
AURORA LIGHTING, INC.
19329 US HIGHWAY 19 NORTH
CLEARWATER, FL 33764



SUBJECT: AURORA LIGHTING, INC.
Ref. Number: P03000062209

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell
Regulatory Specialist II

Letter Number: 111A00009162

RECEIVED
11 APR 22 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Registered Office Change
Name of Corporation

DOCUMENT NUMBER: P03000062209

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Administration
Name of Contact Person

Aurora Lighting Inc
Firm/Company

19329 US Highway 19 North
Address

Clearwater, Florida, 33764
City/State and Zip Code

info@groupaurora.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Administration Office at (727) 5244270
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Aurora Lighting, inc.
2. The principal office address: 19329 US Highway 19 North
Clearwater, Florida, 33764
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 06/04/2003 Document number: P030000062209

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Esther Kimani - (Resigned)

1328 Dorothy Drive

Clearwater, Florida, 33764

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Susan Raineri

12035 34th Street North, Suite 2, St Petersburg

P.O. Box NOT acceptable

Florida, 33716


The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

MARK COMISKEY
Printed or typed name and title

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

04/18/11
Date

If signing on behalf of an entity:

Typed or Printed Name

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)