

P110000002054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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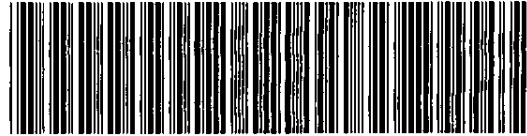
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

TH 12-2-11



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 22, 2011

ROBIN JOHNSTON  
ARO HOLDINGS INC  
13506 SUMMERPORT VILLAGE PKWY #113  
WINDERMERE, FL 34786

SUBJECT: ARO HOLDINGS, INC.  
Ref. Number: P11000002054

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

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 911A00026404

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11 DEC -2 AM 11:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: ARO HOLDINGS INC.  
Name of Corporation

DOCUMENT NUMBER: P11000002054

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:

ROBIN JOHNSTON  
Name of Contact Person

ARO HOLDINGS INC d/b/a Florida Sunshine Holiday Homes  
Firm/Company

13506 SUMMERPORT VILLAGE PARKWAY #118  
Address

WINDERMERE, FLORIDA 34786  
City/State and Zip Code

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

For further information concerning this matter, please call:

ROBIN JOHNSTON at ( 407 ) 451-2481  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ARO HOLDINGS, INC.
2. The principal office address: 6510 SW 20<sup>th</sup> Street  
Plantation, FL 33317
3. The mailing address (if different): 13506 Summerport Village Parkway #113  
Windermere, FL 34786
4. Date of incorporation/qualification: 01/16/11 Document number: P11000002054
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)

Amy O'Day  
6510 SW 20<sup>th</sup> Street  
Plantation, FL 33317

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

Amy O'Day  
13506 Summerport Village Parkway #113  
P.O. Box NOT acceptable  
Windermere, FL 34786

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TALLAHASSEE, FLORIDA

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.

Rod Johnson  
Signature of an officer or director

Robin Johnson - Corporate Secretary  
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.

Amy O'Day  
Signature of Registered Agent

11/28/11  
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)