

PIB 3000503

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

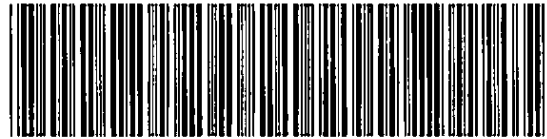
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400313306794

05/24/18 - 61016---001 **35.00

FILED

10 MAY 29 PM 2:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

010 RB.

R. WHITE

MAY 30 2018

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ARO ENTERPRISES, INC.

(Name of Corporation)

DOCUMENT NUMBER: P13000050137

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT OSTELLINO

(Name of Person)

ARO ENTERPRISES, INC.

(Name of Firm/Company)

10735 VERSAILLES BLVD.

(Address)

WELLINGTON, FL 33449

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert J Ostellino

(Name of Person)

at (5201) 441-5462

(Area Code & Daytime Telephone Number)

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

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, BARBARA E. WAARDENBURG, hereby resign as PSTD
(Title)

of ARO ENTERPRISES, INC.
(Name of Corporation)

P13000050137, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)
BARBARA E. WAARDENBURG

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
18 MAY 29 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA