

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000069987

Entity Name: ARISTO INSURANCE GROUP, LLC

Current Principal Place of Business:

315 GRAY ROAD
LITHIA, FL 33547

Current Mailing Address:

POST OFFICE BOX 280
LITHIA, FL 33547 US

FEI Number: 80-0229490

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHERMERHORN, CYNTHIA J
315 GRAY ROAD
LITHIA, FL 33547 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CYNTHIA J. SCHERMERHORN

04/29/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name SCHERMERHORN, PHILIP C
Address POST OFFICE BOX 280
City-State-Zip: LITHIA FL 33547

Title MGRM
Name SCHERMERHORN, CYNTHIA J
Address POST OFFICE BOX 280
City-State-Zip: LITHIA FL 33547

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CYNTHIA J. SCHERMERHORN

MANAGING MEMBER

04/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date