

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000072906

**Entity Name:** ARDO LLC.

**Current Principal Place of Business:**

1340 CHARLESTON SQUARE DRIVE  
SUITE #203  
NAPLES, FL 34110

**Current Mailing Address:**

1340 CHARLESTON SQUARE DRIVE  
SUITE #203  
NAPLES, FL 34110 US

**FEI Number:** 61-1928080

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BERARDI, VINCENZO  
1340 CHARLESTON SQUARE DRIVE  
SUITE #203  
NAPLES, FL 34110 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name BERARDI, VINCENZO  
Address 1340 CHARLESTON SQUARE DRIVE  
SUITE #203  
City-State-Zip: NAPLES FL 33110

*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:** VINCENZO BERARDI

**MANAGER**

**01/22/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date