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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
J. HORNE	
FEB 2 7 2024	
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COVER LETTER

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TO:	Registration Section
	Division of Corporations

Ruggiero Group Benefits Agency, LLC
SUBJECT:

Some of

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Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas W Ruggiero

Name of Person

Ruggiero Group Benefits Agency, LLC

Firm/Company

516 S Dixiw HWY Suite 326

Address

West Palm Beach, FL 33401

City/State and Zip Code

info@ruggierogroupbenefits.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher T. Ruggiero

Name of Person

at (_____) Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed)

\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Т	AMENDMENT
ARTICLES OF C	DRGANIZATION
0	
Ruggiero Group Benefits, LLC	
(Name of the Limited Lizbility Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on $\frac{12/18/2019}{2019}$ and assigned
	were filed on and assigned
Florida document number L20000001160	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	sility company here:
	anty company acre.
Ruggiero Group Benefits Agency, LLC The new name must be distinguishable and contain the words "Limited Liabil	lity Company " the designation "LLC" or the abbreviation "LLC"
	Ruggiero Group Benefits Agency, LLC
Enter new principal offices address, if applicable:	516 S Dixiw HWY Suite 326
(Principal office address MUST BE A STREET ADDRESS)	
	West Palm Beach, FL 33401
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
R If amending the registered agent and/or registered office :	address on our records, enter the name of the new register
	address on our records, <u>enter the name of the new register</u>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new register</u>
	address on our records, <u>enter the name of the new register</u>

Enter Florida street address

, Florida ______ Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Ryan T McDougal	3418 Northern BLVD	_ 🗆 Add
		Long Island City, NY 11101	■Remove
MGR	Ruggiero Insurance Agency, LLC	516 S Dixiw HWY Suite 326	Dbb 🗋
		Suite 326	Remove
		West Palm Beach, FL 33401	Change
MGR	Ruggiero Investments, Inc.	516 S Dixie HWY Suite 326	■Add
		Suite 326	🗆 Remove
		West Palm Beach, FL 33401	□ Change
			🗆 Add
			🗆 Remove
			🗆 Change
			🗆 Add
			🗆 Remove
			🗆 Add
			🗆 Remove

D. If amending any other information, enter change(s) here: (Attach	udditional shcets, if necessary.)
Updating the entity name from Ruggiero Group Benefits, LLC to the	Amended name of

Ruggiero Group Benefits Agency, LLC

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Removing the 2 following MGR's :

Remove: Ryan T. McDougal - 3418 Northern Blvd. Long Island City, NY 11101

Remove: Ruggiero Insiurance Agency, LLC - 516 S Dixie HWY Suite 326 West Palm Beach, FL 33401

Replacing with/ Adding the following MGR :

Ruggiero Investments, Inc. - 516 S Dixie HWY Suite 326 West Palm Beach, FL 33401

(optional)

E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated February 5th	2024
Signature	of a member or authorized representative of a member
Christopher T. Ruggiero	

Typed or printed name of signee