

271 000 352592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

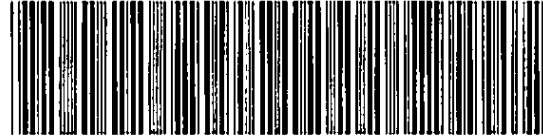
(Business Entity Name)

(Document Number)

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Albritton

ALBRITTON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DIGIPRO CONSULTING, LLC

\_\_\_\_\_  
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:

GAZZILLO, NICHOLAS

\_\_\_\_\_  
Name of Person

DIGIPRO CONSULTING, LLC

\_\_\_\_\_  
Firm/Company

15779 97TH RD N

\_\_\_\_\_  
Address

WEST PALM BEACH, FL 33412

\_\_\_\_\_  
City/State and Zip Code

NGAZZILLO@DIGIPROCONSULT.COM

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

For further information concerning this matter, please call:

GAZZILLO, NICHOLAS

561 207-1648  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

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

**Mailing Address:**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2021 DEC 22 AM 11:20

November 24, 2021

NICHOLAS GAZZILLO  
15779 97TH RD N  
WEST PALM BEACH, FL 33412

SUBJECT: DIGIPRO CONSULTING, LLC  
Ref. Number: L21000382592

We have received your document for DIGIPRO CONSULTING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6050.

Irene Albritton  
Regulatory Specialist III

Letter Number: 321A00028556

**If Changing Registered Agent, Signature of New Registered Agent**

Title	Name	Address	Type of Action
AMBR	GAZZILLO, NICHOLAS	15779 97TH RD N	<input type="checkbox"/> Add
		WEST PALM BEACH, FL 33412	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
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(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)

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 10/29 2021

NICHOLAS GAZZILLO

Typed or printed name of signee