## 2500009

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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2025 JUN-9 PM 4: 25

## COVER LETTER

TO: Registration Se Division of Cor			
	onsulting, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Christopher T. Ruggiero		
		Name of Person	
	Ruggiero, LLC		
		Firm/Company	
	500 S Australian Ave Suite	e 608	
		Address	<del></del>
	West Palm Beach, FL 334	91	
		City/State and Zip Code	
	christopher@niggieroconsu	Iting.com to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c		
Christopher T. Ruggiero		917 902-3392	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address:	
Registration S Division of C		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



May 19, 2025

CHRISTOPHER T. RUGGIERO 2ND ML 516 S. DIXIE HWY. SUITE 326 WEST PALM BEACH, FL 33401

SUBJECT: RUGGIERO CONSULTING, LLC

Ref. Number: L25000097226

We have received your document for RUGGIERO 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.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 925A00009088

Veccived by email 6/9/25

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

RUGGIERO CONSULTING, LLC

2025 JUN -9 PM 4: 25

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  [Principal office address MUST BE A STREET ADDRESS]  Enter new mailing address, if applicable:  [Mailing address MAY BE A POST OFFICE BOX]  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered Office Address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  [In hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with to 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 affice address, I hereby confirm that the limited liability company has been notified in writing of this change.	Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here:    Name of New Registered Agent:   New Registered Office Address:   Enter Florida street address		Limited Liability Company)		_ >4 4 4 1 1 13
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Enter Florida street address	Enter Florida street address				
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The state of the s		New Registered Office Address:  New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and coacept the obligations of my position as registered agheing filed to merely reflect a change in the registered	Cuv  I Agent:  and agree to act in this capacity  complete performance of my duti  tent as provided for in Chapter	_, Florida _ v. I further a jes. and I am 605, F.S. O	Zip Code gree to comply with th familiar with and ; if this document is
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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Ruggiero, LLC	500 S Australian Ave Suite 608	
		West Palm Beach, FL 33401	□Remove
		100% Managing Member	□Change
AMBR	Thomas A. Ruggiero		
			□Remove
		Change from MGR to AMBR	Change
AMBR	Thomas W. Ruggiero		□Add
			□Remove
		Change from MGR to AMBR	<b>■</b> Change
AMBR	Christopher T. Ruggiero		□Add
			□Remove
	·	Change from MGR to AMBR	TALLA HASSEE, FLORIDA
			FE GRAdd
			□Remove
			7.7

Managing Member: Ruggie	ro, LLC 100% Owner			
Authorized Member: Thoma	ıs A. Ruggiero			
Authorized Member: Thom	as W. Ruggiero			
Authorized Member: Chris	topher T. Ruggiero			
fective date, if other, than the	e date of filing:	o date of filing or more than 90	(optional)	Purposet to 605 0207
te: If the date inserted in this becument's effective date on the D	lock does not meet the applica	ble statutory filing requiren	nents, this date v	will not be listed as
ecord specifies a delayed effectivis filed.	e date, but not an effective tin	ne, at 12:01 a.m. on the ear	lier of: (b) The	90#rday after the
ated March 11th	2025	<u> </u>	l	PM 4: 25
	Signature of a member or author	ized representative of a themb	7325 er	<u> </u>

Filing Fee: \$25.00