

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000261859

**Entity Name:** TUTTLE INSURANCE SOUTH, LLC

**Current Principal Place of Business:**

28210 OLD 41 RD  
UNIT 303  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

19 NEW HAVEN RD  
SEYMOUR, CT 06483 US

**FEI Number:** 84-3587643

**Certificate of Status Desired:** No

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

TUTTLE, SCOTT S  
6832 TRAIL BLVD  
NAPLES, FL 34108 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 TUTTLE, SCOTT S  
Address 6832 TRAIL BLVD  
City-State-Zip: NAPLES FL 34108

*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:** SCOTT TUTTLE

**OWNER / PRESIDENT**

**03/17/2023**

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

\_\_\_\_\_  
Date