

LL5066682937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

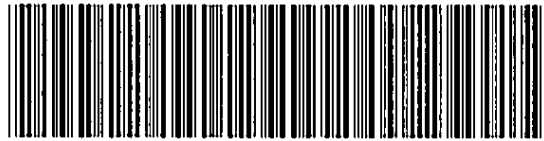
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LLC N/C & Amend

2022 OCT -3 AM 11:00

FILED

2022 OCT -3 PM 3:28

RECEIVED

A. RAMSEY

OCT - 7 2022



FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORRECTED
Please Allow For
Same File Date

October 4, 2022

SUNSHINE STATE CORPORATE COMPLIANCE COMPANY

SUBJECT: TUTELA MONITORING SYSTEMS, LLC
Ref. Number: L05000080937

We have received your document for TUTELA MONITORING SYSTEMS, 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):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 122A00022047

RECEIVED

2022 OCT -6 PM 4:12

2022 OCT -6 PM 4:12

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

2022 OCT -3 AM 11:00

Tutela Monitoring Systems, LLC

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

The Articles of Organization for this Limited Liability Company were filed on August 16, 2005 and assigned
Florida document number 42-1682299.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Checkit LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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

City

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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Stephen Peck	485 Mariner Blvd	<input checked="" type="checkbox"/> Add
		Spring Hill, FL 34609	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Christopher Kyle	485 Mariner Blvd	<input checked="" type="checkbox"/> Add
		Spring Hill, FL 34609	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Greg Price	485 Mariner Blvd	<input checked="" type="checkbox"/> Add
		Spring Hill, FL 34609	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Authorized Representative	Caroline Noble	11635 Trumbull Dr	<input type="checkbox"/> Add
		Spring Hill, FL 34609	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Authorized Representative	Bruce Anderson	3390 Hickorywood Way	<input type="checkbox"/> Add
		Tarpon Springs, FL 34688	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)

(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.

(b) The 90th day after the record is filed.

Dated September 6 2022

- DocuSigned by:

Stephen Peck

[illegible]

Signature of a member or authorized representative of a member

Stephen Peck

Typed or printed name of signee