Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

City of Jacksonville, Florida
Procurement Award Form (PAF)

Part 1: Form Type JPAC Award Request and Administrative Details

Goods and/or Services: ESC-0329-22: Electronic Ankle and Alcohol Monitoring Services

Requested Action/Authority:

Request to amend ESC-0329-22 Electronic Ankle and Alcohol Monitoring Services to change the supplier's name from Attenti US, Inc., to Allied Universal Electronic Monitoring US, Inc. Attached are the W-9's, IRS Document, and the Legal Name Change documents. We are requesting that the contract be amended by the Office of General Counsel to reflect the name change.

Justification/Explanation:

The FEIN number did not change so we have been able to continue to make payments. (Name Change / Not Novation)

Legal Contract #:	71865-22	Contract Date:	07/29/2022	Change Order/AMD #:	2	
PO/Release #:	71865-22	Bid Date:	03/16/2022	Awarded Supplier:	Attenti Us	
Licenses Verified:	N/A	Effective Date:	09/26/2024	Basis of Award:	N/A	
Federally Funded:	N/A	No. Invited:	N/A	Responses Received:	3	Attachments:
Solicitation:	RFP-NONCON ESC-0329 - 22			Procurement Contract #:	POA - 71865-22	
Executed By:	Office of General Counsel					

PoP:Base:	N/A	Options:	Five Year Agreement	Extension(s):	2
JSEB Rec.:	Encouragement	%:	0	Bonds Waived Pursuant To:	N/A

Fund:	00000	Center:	000000	Acct:	000000	Proj:	000000	Activity:	00000000	$	0.00
Fund:		Center:		Acct:		Proj:		Activity:		$	
Fund:		Center:		Acct:		Proj:		Activity:		$	

New NTE/GMP:	$ 0.00	Contingent Amount:	$ 0.00	DMP/ODPO Amount:	$ 0.00

Using Agency/BU:	SHPS:POLICE_SERVICES			
Concurrence:	Signed by: Clement, Bill 3F803720B14E49E...	Title:	JSO - CHIEF OF BUDGET AND MANAGEMENT	9/18/2024
Concurrence:		Title:		
Concurrence:		Title:		
Concurrence:		Title:		

Procurement Analyst/Buyer:	Signed by: Wallace Cohen, Olive A7A7DE8876BC4DD...	Chief of Procurement:	DocuSigned by: B19F1D517352456... 9/23/2024
Name:	Wallace Cohen, Olive	Name:	Dustin L. Freeman

Part 2: JPAC Actions on Above Requests/Recommendations
All Award Actions Subject to Lawfully Appropriated Funds

Members Who Approve:	
Members Who Disapprove:	
Other Action:	

Date:

Part 3: Final Awarding Authority Action

Action:

Date:

Signature:

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

PAF Instructions

Form Type: Select the type of award from the dropdown options. This form will be used for all Procurement awards (Administrative Awards and JPAC Requests).

Goods and/or Services: Enter a brief description of the types of goods and services included in the request.

Requested Action/Authority: Enter a brief description of the requested action or authority being sought. i.e.; *request permission to award to the lowest, responsive responsible bidder for ITB or award the highest ranked supplier for an RFP*.

Justification/Explanation: Enter a brief justification or explanation for the requested action. Use this box to add any additional information such as additional account strings, or other information essential for contract execution.

Legal Contract Number: Provide the existing City contract number if applicable. This will be the same number as your POA number.

Contract Date: Select the effective date for the contract using the calendar option in the form. Leave blank for contracts to become effective on the execution date.

Change Order/AMD #: Provide the applicable Change Order or Amendment number represented by this request.

Date: Enter the date of PAF submission.

Effective Date: Enter the effective date of requested authority and/or action.

Solicitation: Select the competitive procurement method used (1Cloud generated prefix), enter the 1Cloud generated numbering sequence, and 1Cloud generated fiscal year of solicitation

Basis of Award: Select from Lowest Price Technical Acceptable (LPTA), Highest Price Technical Acceptable (HPTA),

Procurement Contract #: This is your PO number. Select Type, Enter Number

PO/Release Number: Enter PO Release Number

Awarded Supplier: Enter Awarded Supplier Name

Federally Funded: Select yes or no from dropdown if Federal Funds will be used.

Responses Received: This is the number of responses received.

No Bids Received: The number of responses received that indicated supplier would not bid.

Executed By: Select whether executed by OGC or JPAC / Chief of Procurement

PoP Base: Select the Period of Performance for the initial period.

Options: Period for each renewal period i.e. one (1) two (2) year.

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Extensions: How many extensions have we preformed after the initial base period and option periods have been completed?

JSEB Goal: Select the percentage established by JSEB.

JESB Other: Select Encouragement or Set Aside Option

Bonds Waived Pursuant to: Select authority allowing bonds to be waived.

Funding Source: Fund/Center/Account/Project/Activity, all fields are required even if zeros.

New NTE/GMP: Enter the new total not to exceed the amount. Note, this should match the contract maximum indebtedness, if applicable**.**

Contingent Amount: If your agency requests an allowance for unforeseen additional expenses, then specify the amount of your requested increase and new NTE that represents the contingency allowance. This is over and above any quote.

DMP/ODPO Amount: Enter the total Direct Materials Purchase/Owner Direct Purchase Order amount for project.

Attachments: Name any attachments included as supplemental information to the PAF.

Using Agency/BU: This should be the requesting agency/requirement owner.

Concurrence: Electronic Signature

Title: Enter the title of person electronically signing form.

**Any fields where there is no data available, or no entry is required, either leave it blank or enter N/A. Any fields where there is known data, include for informational purposes. Any changes to an original award should contain the data that is being changed and any other relevant data required for JPAC review and approval.*

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

JACKSONVILLE SHERIFF'S OFFICE

T.K. Waters, Sheriff

Dedication. Service. Honor. Community.

To:	Competitive Sealed Proposal Evaluation Committee (CSPEC)
Thru:	Dustin Freeman Chief of Procurement
Thru:	Bill Clement, CPA WM Chief of Budget
From:	Kevin Goff KGM Director of Department of Corrections
Subject:	ESC-0329-22 Electronic Ankle and Alcohol Monitoring Services
Date:	September 16, 2024

The Jacksonville Sheriff's Office is requesting an amendment to ESC-0329-22 Electronic Ankle and Alcohol Monitoring Services to change the supplier's name from Attenti US, Inc., to Allied Universal Electronic Monitoring US, Inc. Attached are the W-9's, IRS Document, and the Legal Name Change documents. We are requesting that the contract to be amended by the Office of General Counsel to reflect the name change.

Please let me know if you require any additional information. Thank you for your assistance.

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

SUBJECT: ELECTRONIC ANKLE AND ALCOHOL MONITORING SERVICES

BID #: ESC-0329 -22 **OPEN DATE: 2022-03-16**

COMPETITIVE SEALED PROPOSAL EVALUATION COMMITTEE

KIND AND BASIS OF CONTRACT: SERVICE CONTRACT - Five (5) Years with Two (2) One (1) Year Renewal Options

AGENCY: JACKSONVILLE SHERIFF'S OFFICE

BASIS OF AWARD: Highest Scoring Bidder Based on Evaluation Criteria

NUMBER OF BIDS INVITED: 29 **NUMBER RECEIVED:** 3 **OTHER:** 0

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:

Recommend approval to amend award and contract (71565-22) to Attenti US, Inc., for Electronic Ankle and Alcohol Monitoring Services for the Jacksonville Sheriff's Office to include the products/pricing as listed on the attachment. Total estimated expenditure remains unchanged.

To be executed by formal contract amendment through Office of General Counsel

ATTACHMENTS: Recommendation Memo, Vendor Letter, Previous Award

ANALYST: OLIVE WALLACE-COHEN **RESPECTFULLY SUBMITTED:** DUSTIN FREEMAN, CHIEF PROCUREMENT DIVISION

CONCURRENCE BY: Tammy Morris, Director of Department of Corrections

(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF CSPEC COMMITTEE ON RECOMMENDATIONS ABOVE

MEMBERS APPROVING 5 MEMBERS DISAPPROVING 0 DATE: 10/20/2022

OTHER:

ACTION OF AWARDING AUTHORITY DATE 10/20/22

APPROVED ✓ DISAPPROVED

OTHER

SIGNATURE OF AUTHENTICATION

Brian Hughes
Chief Administrative Officer
For: Mayor Lenny Curry
Under Authority of:
Executive Order No: 2019-02

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

SUBJECT: ELECTRONIC ANKLE AND ALCOHOL MONITORING SERVICES

BID #: ESC-0329 -22 **OPEN DATE: 2022-03-16**

COMPETITIVE SEALED PROPOSAL EVALUATION COMMITTEE

KIND AND BASIS OF CONTRACT: SERVICE CONTRACT - Five (5) Years with Two (2) One (1) Year Renewal Options

AGENCY: JACKSONVILLE SHERIFF'S OFFICE

BASIS OF AWARD: Highest Scoring Bidder Based on Evaluation Criteria

NUMBER OF BIDS INVITED: 29 **NUMBER RECEIVED:** 3 **OTHER:** 0

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:
Recommend approval of award to Attenti US, Inc., as the highest-ranking bidder for Electronic Ankle and Alcohol Monitoring Services for the Jacksonville Sheriff's Office. Period of service will be for five (5) years from date of executed contract with two (2) one (1) year renewal options. Total estimated expenditure not to exceed amount is $4,715,542.80.

Attenti US, Inc.	87.44	1
Sentinel Offenders Services, LLC	85.67	2
Buddi US, LLC	72.73	3

Funding for this award to be encumbered by account:
00111.562101.544020.000000.00000000.00000.0000000 – $3,130,712.80
00111.562101.544020.000000.00001790.00000.0000000 – $1,584,830.00 - to be executed by formal contract through Office of General Counsel and process by Purchase Order Release(s).

ATTACHMENTS: Recommendation Memo, Scoring Sheet, Scope, Evaluation Criteria/Matrix

ANALYST: OLIVE WALLACE-COHEN **RESPECTFULLY SUBMITTED:** GREGORY PEASE, CHIEF PROCUREMENT DIVISION

CONCURRENCE BY: Tammy Morris, Director of Department of Corrections

(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF CSPEC COMMITTEE ON RECOMMENDATIONS ABOVE

MEMBERS APPROVING 5 **MEMBERS DISAPPROVING** 0 **DATE:** 6/9/2022

OTHER:

ACTION OF AWARDING AUTHORITY **DATE** 6/10/2022

APPROVED ✓ **DISAPPROVED**

OTHER

SIGNATURE OF AUTHENTICATION

Brian Hughes
Chief Administrative Officer
[illegible] Order No. 2015-02

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to *www.irs.gov/FormW9* for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Allied Universal Electronic Monitoring US, Inc.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☑ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any)

Exemption from FATCA reporting code (if any)

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions. P O BOX 850001 DEPT# 9903

Requester's name and address (optional)

ORLANDO FL 32885-9903

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

☐☐☐ - ☐☐ - ☐☐☐☐

or

Employer identification number

1 3 - 4 0 8 8 0 5 2

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ Teresa K. Wellington Date ▶ **JANUARY 9, 2024**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, *later.*

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to *www.irs.gov/FormW9* for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. **Allied Universal Electronic Monitoring US, Inc.**

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☑ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any)

Exemption from FATCA reporting code (if any)

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
1838 Gunn Highway

Requester's name and address (optional)

6 City, state, and ZIP code
Odessa, FL 33556

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

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Social security number
☐☐☐ - ☐☐ - ☐☐☐☐

or

Employer identification number
1 3 - 4 0 8 8 0 5 2

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ Teresa K. Wellington Date ▶ **JANUARY 9, 2024**

General Instructions

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Purpose of Form

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- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, *later.*

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

IRS Department of the Treasury
Internal Revenue Service

OGDEN UT 84201-0046

In reply refer to: 0423620940
Sep. 12, 2023 LTR 147C 0
13-4088052 000000 00
00006145
BODC: LM

ALLIED UNIVERSAL ELECTRONIC
MONITORING US INC
1838 GUNN HWY
ODESSA FL 33556-3524

041340

Employer identification number: 13-4088052

Dear Taxpayer:

Thank you for your correspondence dated June 20, 2023.

We have changed the name on your account as requested. The number shown above is valid for use on all tax documents.

You can get any of the forms or publications mentioned in this letter by visiting our website at IRS.gov/forms or by calling 800-TAX-FORM (800-829-3676).

If you have questions, you can call us at 800-829-0115.

If you prefer, you can write to us at the address at the top of the first page of this letter.

When you write, include a copy of this letter, and provide your telephone number and the hours we can reach you in the spaces below.

Telephone number ( )_____ Hours _____

Keep a copy of this letter for your records.

Thank you for your cooperation.

Sincerely yours,

Ms. Miera

Ms. Miera
Department Manager, Entity

Enclosures:
Copy of this letter

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

ALLIEDUNIVERSAL

Matthew Lambach
Vice President, Transactions Counsel
161 Washington Street, Suite 600
Conshohocken, PA 19428
matthew.lambach@aus.com | 484.351.1708

May 25, 2023

To whom it may concern,

My name is Matthew Lewis Lambach, an attorney admitted to practice law in the Commonwealth of Pennsylvania, United States by the Pennsylvania Supreme Court (Attorney ID 312017). I serve as internal legal counsel to Allied Universal's business units, including Allied Universal Electronic Monitoring US, Inc., a Delaware corporation.

By Certificate of Amendment of Certificate of Incorporation filed with the Delaware Secretary of State effective as of April 4, 2023, the company amended its legal entity name from Attenti US, Inc. to Allied Universal Electronic Monitoring US, Inc. A copy of the Certificate is attached hereto.

The purpose of this letter to memorialize that in my legal opinion the name change from Attenti US, Inc. to Allied Universal Electronic Monitoring US, Inc. was properly effected under applicable law on April 4, 2023.

Please do not hesitate to contact me with any questions.

Best regards,

Matthew Lambach

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

Exhibit A

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "ATTENTI US, INC.", CHANGING ITS NAME FROM "ATTENTI US, INC." TO "ALLIED UNIVERSAL ELECTRONIC MONITORING US, INC.", FILED IN THIS OFFICE ON THE FOURTH DAY OF APRIL, A.D. 2023, AT 1:01 O`CLOCK P.M.

Jeffrey W. Bullock, Secretary of State

3130651 8100
SR# 20231285686

Authentication: 203077626
Date: 04-04-23

You may verify this certificate online at corp.delaware.gov/authver.shtml

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

State of Delaware
Secretary of State
Division of Corporations
Delivered 01:01 PM 04/04/2023
FILED 01:01 PM 04/04/2023
SR 20231285686 - File Number 3130651

STATE OF DELAWARE
CERTIFICATE OF AMENDMENT
OF CERTIFICATE OF INCORPORATION

The corporation organized and existing under and by virtue of the General Corporation Law of the State of Delaware does hereby certify:

FIRST: That at a meeting of the Board of Directors of Attenti US, Inc. resolutions were duly adopted setting forth a proposed amendment of the Certificate of Incorporation of said corporation, declaring said amendment to be advisable and calling a meeting of the stockholders of said corporation for consideration thereof. The resolution setting forth the proposed amendment is as follows:

RESOLVED, that the Certificate of Incorporation of this corporation be amended by changing the Article thereof numbered "1" so that, as amended, said Article shall be and read as follows:

The name has been amended to Allied Universal Electronic Monitoring US, Inc.

SECOND: That thereafter, pursuant to resolution of its Board of Directors, a special meeting of the stockholders of said corporation was duly called and held upon notice in accordance with Section 222 of the General Corporation Law of the State of Delaware at which meeting the necessary number of shares as required by statute were voted in favor of the amendment.

THIRD: That said amendment was duly adopted in accordance with the provisions of Section 242 of the General Corporation Law of the State of Delaware.

IN WITNESS WHEREOF, said corporation has caused this certificate to be signed this 4th day of April, 2023.

By: Arnold Roese
Authorized Officer

Title: Vice President

Name: Arnold K. Roese
Print or Type

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "ATTENTI US, INC.", CHANGING ITS NAME FROM "ATTENTI US, INC." TO "ALLIED UNIVERSAL ELECTRONIC MONITORING US, INC.", FILED IN THIS OFFICE ON THE FOURTH DAY OF APRIL, A.D. 2023, AT 1:01 O`CLOCK P.M.

Jeffrey W. Bullock, Secretary of State

3130651 8100
SR# 20231285686

Authentication: 203077626
Date: 04-04-23

You may verify this certificate online at corp.delaware.gov/authver.shtml

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

State of Delaware
Secretary of State
Division of Corporations
Delivered 01:01 PM 04/04/2023
FILED 01:01 PM 04/04/2023
SR 20231285686 - File Number 3130651

STATE OF DELAWARE
CERTIFICATE OF AMENDMENT
OF CERTIFICATE OF INCORPORATION

The corporation organized and existing under and by virtue of the General Corporation Law of the State of Delaware does hereby certify:

FIRST: That at a meeting of the Board of Directors of
Attenti US, Inc.
resolutions were duly adopted setting forth a proposed amendment of the Certificate of Incorporation of said corporation, declaring said amendment to be advisable and calling a meeting of the stockholders of said corporation for consideration thereof. The resolution setting forth the proposed amendment is as follows:

RESOLVED, that the Certificate of Incorporation of this corporation be amended by changing the Article thereof numbered " 1 " so that, as amended, said Article shall be and read as follows:

The name has been amended to Allied Universal Electronic Monitoring US, Inc.

SECOND: That thereafter, pursuant to resolution of its Board of Directors, a special meeting of the stockholders of said corporation was duly called and held upon notice in accordance with Section 222 of the General Corporation Law of the State of Delaware at which meeting the necessary number of shares as required by statute were voted in favor of the amendment.

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By: Arnold Roese
Authorized Officer

Title: Vice President

Name: Arnold K. Roese
Print or Type

Docusign Envelope ID: BC54FAE0-0045-4ECC-B1F0-DD56114BF52E

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2023

CSC

,

Re: Document Number F08000000853

The Amendment to the Application of a Foreign Corporation for ATTENTI US, INC. which changed its name to ALLIED UNIVERSAL ELECTRONIC MONITORING US, INC., a Delaware corporation authorized to transact business in Florida, was filed on April 12, 2023.

Should you have any questions regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Jasmine N Horne
Regulatory Specialist II
Division of Corporation

Letter Number: 323A00008335

Account number: I20000000195

Amount charged: 35.00

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PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F08000000853
(Document number of corporation (if known)

1. Attenti US, Inc.
(Name of corporation as it appears on the records of the Department of State)

2. Delaware
(Incorporated under laws of)

3. 12/04/2017
(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? April 4, 2023

5. Allied Universal Electronic Monitoring US, Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

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Title/ Capacity	Name	Address	Type of Action
			☐Add
			☐Remove
			☐Add
			☐Remove
			☐Add
			☐Remove
			☐Add
			☐Remove
			☐Add
			☐Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Arnold Roese

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Arnold K. Roese

(Typed or printed name of person signing)

Vice President

(Title of person signing)

FILING FEE $35.00

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Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "ATTENTI US, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ALLIED UNIVERSAL ELECTRONIC MONITORING US, INC." ON THE FOURTH DAY OF APRIL, A.D. 2023, AT 1:01 O`CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

Jeffrey W. Bullock, Secretary of State

SECRETARY'S OFFICE DELAWARE 1793 1855

3130651 8320
SR# 20231350304

Authentication: 203102039
Date: 04-07-23

You may verify this certificate online at corp.delaware.gov/authver.shtml