

604462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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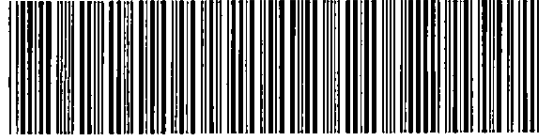
(Business Entity Name)

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STATE  
OF  
NEW YORK

*Handwritten signature*

**BARNES & COHEN, P.A.**

ATTORNEYS AT LAW

2747 ART MUSEUM DRIVE, SUITE 500

**JACKSONVILLE, FLORIDA 32207**

TELEPHONE (904) 396-5181

FAX (904) 396-9008

[bbcjustice.com](http://bbcjustice.com)

GEORGIA OFFICES:  
KINGSLAND - ST. MARYS - BRUNSWICK

REPLY TO:  
JACKSONVILLE OFFICE

CHALMERS H. BARNES\*\*  
GLENN E. COHEN\*  
PATRICK B. SULLIVAN\*\*\*\*  
ANDREW J. PALADINO\*\*\*\*

\* MEMBER OF FL  
\*\* MEMBER OF FL & GA  
\*\*\* MEMBER OF FL, GA, PA  
\*\*\*\* MEMBER OF FL, GA, SC, NJ

January 24, 2024

VIA PRIORITY MAIL  
Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Barnes Cohen & Sullivan, P.A.  
Ref. Number: 604462

Dear Sir/Madam:

Enclosed is our firm's check for \$35.00 along with the original Articles of Amendment changing the firm's name from Barnes & Cohen, P.A. to Barnes Cohen & Sullivan, P.A.

Should you have any questions, please feel free to contact me.

Sincerely,

**BARNES & COHEN, P.A.**



Chalmers H. Barnes

CHB/tw  
Encl.  
[558417]

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: BARNES & COHEN, P.A.

DOCUMENT NUMBER: 604462

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHALMERS H BARNES

Name of Contact Person

BARNES COHEN & SULLIVAN, P.A.

Firm/ Company

2747 ART MUSEUM DR., STE 500

Address

JACKSONVILLE, FL 32207

City/ State and Zip Code

chuck2187@bellsouth.net ; twright@bbcjjustice.com

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

For further information concerning this matter, please call:

Chalmers H. Barnes at ( 904 ) 396-5181  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

BARNES & COHEN, P.A.

(Name of Corporation as currently filed with the Florida Dept. of State) JAN 30 AM 10:58

604462

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

BARNES COHEN & SULLIVAN, P.A.

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

2747 ART MUSEUM DR #500

JACKSONVILLE, FL 32207

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

2747 ART MUSEUM DR #500

JACKSONVILLE, FL 32207

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

*Name of New Registered Agent* \_\_\_\_\_

\_\_\_\_\_  
(Florida street address)

*New Registered Office Address:* \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

**Check if applicable**

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**

*(Attach additional sheets, if necessary)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

**Example:**

X Change                      PT      John Doe

X Remove                      V      Mike Jones

X Add                              SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>Change</u>	<u>S</u>	<u>PATRICK B. SULLIVAN</u>	<u>2747 ART MUSEUM DR #500</u>
<u>X</u> Add			<u>JACKSONVILLE, FL 32207</u>
<u>Remove</u>			
2) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
3) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
4) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
5) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
6) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			

(Attach additional sheets, if necessary). (Be specific)

[illegible]

(if not applicable, indicate N/A)

[illegible]

JANUARY 1, 2024

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

JANUARY 1, 2024

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

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.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_  
(voting group)

Dated January 24, 2024

Signature

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

CHALMERS H. BARNES

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)