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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

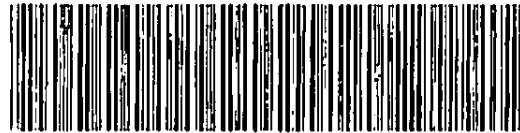
(Document Number)

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2024 AUG 13 PM 4:14
SECRETARY OF STATE
TALLAHASSEE, FL

AB

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Barrett & Jones Associates Corporation

DOCUMENT NUMBER: N23000012769

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

Please return all correspondence concerning this matter to the following:

Iris Barrett

(Name of Contact Person)

N/A

(Firm/ Company)

6251 N.W. 20th Street

(Address)

Sunrise, Florida 33313

(City/ State and Zip Code)

Crystalbarrett7@gmail.com

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

For further information concerning this matter, please call:

Iris Barrett

(Name of Contact Person)

754 302-0015

(Area Code) (Daytime Telephone Number)

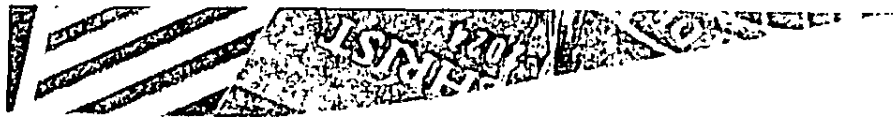
Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
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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

Rec.
8/26/24



FILED

2024 AUG 26 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FL

Articles of Amendment
to
Articles of Incorporation
of

Barrett & Jones Associates Corporation
(Name of Corporation as currently filed with the Florida Dept. of State)

N230000127609
(Decennial Number of Corporation (if known))

Pursuant to the provisions of section 617.1000, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation: N/A The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable: N/A
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable: N/A
(Mailing address MAY BE A POST OFFICE BOX)

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: N/A

New Registered Office Address: _____
(Florida street 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

Amendment Section

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 line of the officer title:
 P - President, VP - Vice President, T - Treasurer, S - Secretary, D - Director, PR - Trustee, C - Chairman or Clerk, CEO - Chief Executive Officer, CFO - Chief Financial Officer. If an officer holds more than one title, list the first letter of each office held: President, Treasurer, Director would be PTP.

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

Copy of Action	Title	Name	Address
☒ Change ☐ Add ☐ Remove	PT	Elliott D. Jones	3461 SW 2nd Ave Bldg 5 #118 Gainesville, FL 32607
☒ Change ☐ Add ☐ Remove	VP	Crystal S. Barrett	6251 NW 20th Street Sunrise, FL 33313
☒ Change ☐ Add ☐ Remove	S	Ethel LaShawn Jones	3461 SW 2nd Ave Bldg 5 #118 Gainesville, FL 32607
☒ Change ☐ Add ☐ Remove	CEO	Tris Barrett	6251 NW 20th Street Sunrise, FL 33313
☒ Change ☐ Add ☐ Remove	D	Lebert Barrett, Jr.	425 Arden Ct Davidson, NC 28423
☒ Change ☐ Add ☐ Remove	D	Ja'Karius Jones	3461 SW 2nd Ave Bldg 5 #118 Gainesville, FL 32607

1. If amending or adding additional Articles, enter change(s) here:
 (Attach additional sheets, if necessary) - Be specific

Article III

A Will to help Others in A-Time of Need is an Organization that focuses on residents who have experienced homelessness, loss of residence, and supporting community activities.

3 Amendments

14

[Lined area for amendments]

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

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 members and the number of votes cast for the amendment(s) was/were sufficient for approval.

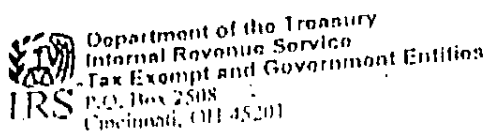
✓ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated: 06-16-2004

Signature: [Handwritten Signature]
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Tris Barrett
(Typed or printed name of person signing)

CEO
(Title of person signing)



BARRETT & JONES ASSOCIATES CORPORATION
5020 IRIS LANE
6751 NW 20TH STREET
SUNRISE, FL 33314

Date: 05/15/2024
Employer ID number: 03-4081442
Person to contact: Name: Customer Service
ID number: 31954
Telephone: 877-829-5500
Accounting period ending: December 31
Public charity status: 509(a)(2)
Form 990 / 990-EZ / 990-N required: Yes
Effective date of exemption: January 01, 2024
Contribution deductibility: Yes
Addendum applies: No
D.I.N.: 26053530004754

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Stephen A. Martin

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements

Letter 947 (Rev. 2-2020)
Catalog Number 35152P



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2024

IRIS BARRETT
6251 NW 20TH ST
SUNRISE, FL 33313

SUBJECT: BARRETT & JONES ASSOCIATES CORPORATION
Ref. Number: N23000012769

We have received your document for BARRETT & JONES ASSOCIATES CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

I AM RETURNING YOUR \$35.00 MONEY ORDER. THE MONEY ORDER NUMBER IS 19-617254354.

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: 024A00018082