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TO: Amendment Section

Division of Corporations

NAME OF CORPO	RATION: Cohen, Blostein &	Ayala, P.A.				
DOCUMENT NUM	P07000134887					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	Lawrence M. Ploucha					
		Name of Contact Person	1			
	Buchanan Ingersoll & Roone	y, P.C.				
	Firm/ Company					
	401 East Las Olas Boulevard, Suite 2250					
Address						
Ft. Lauderdale, FL 33301						
City/ State and Zip Code						
	jcohen@jaycohenlaw.com					
E-mail address: (to be used for future annual report notification)						
For further information	on concerning this matter, pleas	se call:				
Lawrence M. Płoucha, Esq.		954 at (335-1592			
Name of Contact Person		at (954) 335-1592 Area Code & Daytime Telephone Number				
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy 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 OF COHEN, BLOSTEIN & AYALA, P.A.

ITEM I.

Article 1 of the Articles of Incorporation of COHEN, BLOSTEIN & AYALA, P.A., are hereby amended to read as follows:

ARTICLE I

NAME

The name of this Corporation shall be:

COHEN & BLOSTEIN, P.A.

ITEM II.

The foregoing Amendment was adopted by the President of this corporation on the 30 day of Octobe 2023.

IN WITNESS WHEREOF, the undersigned President of this corporation has executed these Articles of Amendment this <u>20</u> day of <u>November</u>, 2023.

JAY COHÉN. President

4870-7089-0887, v. 1

Buchanan Ingersoll & Rooney PC

OPERAPCK ACCT # 1092224208

DATE: 12-13-23 PAYEE:		Florida Department of Sta	ate PAYEE #: FLDEPTST.6327	CHECK #: 9458	
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