

16000050241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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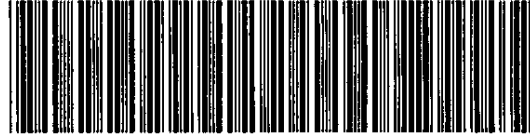
(Business Entity Name)

(Document Number)

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2016 AUG 22 AM 7:45

AUG 30 2016

C LEWIS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 16, 2016

SCOTT NEWSOM / NEWSOM AND ASSOCIATES INC  
174 QUEEN VICTORIA AVE  
ST. JOHNS, FL 32259 US

SUBJECT: NEWSOM AND ASSOCIATES, INC.  
Ref. Number: P16000050241

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

The specific business purpose of the professional association must be stated in the document.

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.

Carolyn Lewis  
Regulatory Specialist II

Letter Number: 816A00017267

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: NEWSOM AND ASSOCIATES, INC.

DOCUMENT NUMBER: P16000050241

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

Please return all correspondence concerning this matter to the following:

SCOTT NEWSOM

Name of Contact Person

NEWSOM AND ASSOCIATES, INC.

Firm/ Company

174 QUEEN VICTORIA AVENUE

Address

ST JOHNS, FL 32259

City/ State and Zip Code

SNEWSOM@SNEWSOMCPA.COM

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

For further information concerning this matter, please call:

SCOTT NEWSOM at ( 904 ) 424-3553  
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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

2016 AUG 22 AM 7:45

NEWSOM AND ASSOCIATES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000050241

(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:**

NEWSOM AND ASSOCIATES, 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**)

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

(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 \_\_\_\_\_

\_\_\_\_\_  
(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*

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

*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.*

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

Address

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\_\_\_\_\_

1000

\_\_\_\_\_

[illegible]

\_\_\_\_\_

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[illegible]

\_\_\_\_\_

\_\_\_\_\_

1. *Journal of the American Medical Association*, 2000; 284: 2689-2695.

[illegible]

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\_\_\_\_\_

\_\_\_\_\_

**E. If amending or adding additional Articles, enter change(s) here:**

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

**AMENDMENT TO ARTICLE I (NAME OF CORPORATION)**

PURSUANT TO FLORIDA STATUTES 621.12, THE ABBREVIATION "INC." CANNOT BE USED IN THE NAME.  
OF THIS ENTITY. FLORIDA STATUTES REQUIRE THAT THE NAME OF THE CORPORATION SHOULD  
CONTAIN THE ABBREVIATION "P.A."

MEMBERS OF THE BOARD AND OWNERS OF THE CORPORATION VOTED TO CHANGE THE NAME FROM  
NEWSOM AND ASSOCIATES, INC. TO NEWSOM AND ASSOCIATES, PA.

**AMENDMENT TO ARTICLE III (PURPOSE OF CORPORATION)**

MEMBERS OF THE BOARD AND OWNERS VOTED TO CHANGE ARTICLE III TO SPECIFICALLY SAY,  
"THIS PROFESSIONAL ASSOCIATION SHALL ENGAGE SOLELY IN THE PRACTICE OF PUBLIC ACCOUNTING  
AND SHALL BE OPEN TO MEMBERSHIP ONLY TO CERTIFIED PUBLIC ACCOUNTANTS DULY LICENSED  
TO PRACTICE IN THE STATE OF FLORIDA."

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,  
provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

N/A

The date of each amendment(s) adoption: \_\_\_\_\_  
date this document was signed.

7/31/2016

FILED Other than the  
SECRETARY OF STATE  
DIVISION OF CORPORATION

Effective date if applicable: \_\_\_\_\_

7/31/2016

(no more than 90 days after amendment file date)

2016 AUG 22 AM 7:45

**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 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 \_\_\_\_\_."

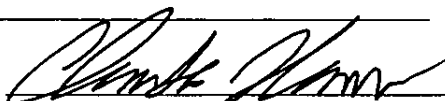
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 07/31/2016

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)

CHRISTOPHER SCOTT NEWSOM

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)