

# K08207

## BEST & ANDERSON

20 N. ORANGE AVENUE, SUITE 505  
ORLANDO, FLORIDA 32801-2438  
TELEPHONE (407) 425-2985  
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DAVID R. BEST  
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LAWRENCE I. HAUSER

ANGELA O'NEIL  
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MARY E. WEBBER  
WILLIAM D. UMANSKY  
JAMES W. NUBEL

\*ALSO ADMITTED IN D.C.

PARALEGALS  
S. KEITH TURNER  
CHRISTEEN BROWNING

GENE C. JOHNSON  
SENIOR INVESTIGATOR  
MORGAN P. SLAUGHTER  
INVESTIGATOR

August 11, 1997

REPLY TO:

ORLANDO

FILED  
97 AUG 14 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

RE: Name change of professional association

Dear Sir or Madam:

Enclosed is the Articles of Amendment to Articles of Incorporation. Please be advised we request that the name of our professional association be changed from A Ability Attorneys - Best & Anderson, P.A. to the following:

Best & Anderson, P.A.

We request that the name "A Ability Attorneys -" be removed from the name of the professional association.

Also enclosed is our firm check in the amount of \$43.75 (this amount includes the \$35.00 filing fee plus \$8.75 for a certificate of status).

Please be advised our telephone number and return address are as follows:

David R. Best, Esquire  
Best & Anderson, P.A.  
20 North Orange Avenue  
Suite 505  
Orlando, Florida 32801

400002266584--4  
-08/14/97--01021--002  
\*\*\*\*\*43.75 \*\*\*\*\*43.75

PH: (407) 425-2985

Lastly, enclosed is a self-addressed and stamped envelope for your convenience in forwarding the certificate of status to our office.

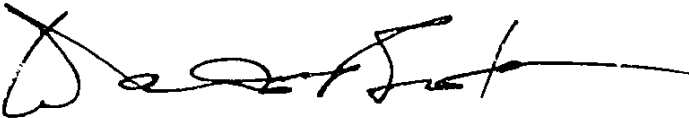


N/C  
V8 AUG 22 1997

Division of Corporations  
August 11, 1997  
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Thank you for your assistance in this matter. If you need any further information, please do not hesitate to contact me.

Very truly yours,

A handwritten signature in black ink, appearing to read 'David R. Best', with a long horizontal flourish extending to the right.

David R. Best  
For the Firm

DRB:cp  
Enclosures: As Stated  
A:13085

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF**

**A ABILITY ATTORNEYS -**

**BEST & ANDERSON, P.A.**

**(present name)**

*Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:*

**FIRST:** Amendment(s) adopted: *(indicate article number(s) being amended, added or deleted)*

We request that the name of the professional association be changed to:

**BEST & ANDERSON, P.A.**

We request that the name "A Ability Attorneys -" be deleted from the name of the professional association.

**SECOND:** 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, are as follows:

None. Not applicable.

**FILED**  
**97 AUG 14 AM 8:39**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

**THIRD:** The date of each amendment's adoption: August 11, 1997

**FOURTH:** Adoption of Amendment(s) (CHECK ONE)

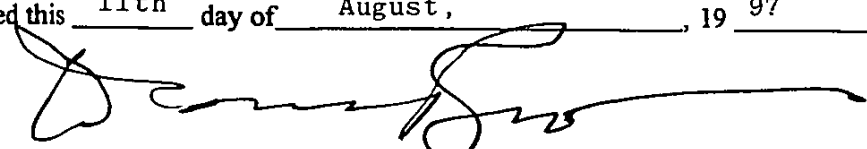
- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled 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.

Signed this 11th day of August, 19 97

Signature

  
(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

DAVID R. BEST

\_\_\_\_\_  
Typed or printed name

President / Director

\_\_\_\_\_  
Title