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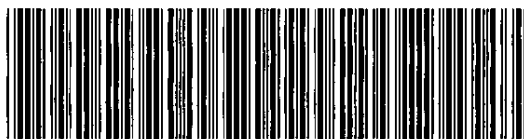
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August 18, 2009

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Abbott Law Firm, P.A.
A Professional Association

Dear Madam/Sir:

Enclosed for filing are an original and one copy of Articles of Amendment to Articles of Incorporation of Abbott Law Firm, P.A., a Florida professional association. Also enclosed is our firm's check for \$43.75 for cost of filing and a certified copy.

Please file the original Articles of Amendment and forward a certified copy to our offices.

If you have any questions, please don't hesitate to contact me.

Very truly yours,


David H. Peek

DHP/bkb
Enclosures

cc: Fred C. Abbott, Esquire

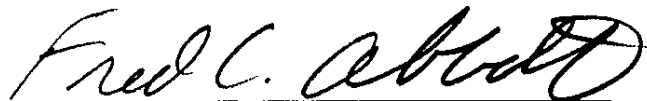


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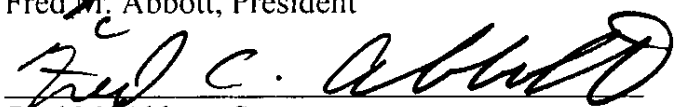
**ARTICLES OF AMENDMENT TO
ARTICLES OF INCORPORATION OF
ABBOTT LAW FIRM, P.A.**

1. The name of this corporation is ABBOTT LAW FIRM, P.A..
2. An amendment to ARTICLE I of the Articles of Incorporation has been adopted by the shareholder of this corporation pursuant to §§607.0704 and 607.0821, Florida Statutes (2009), to change the name to "ABBOTT & WIESENFELD, P.A."
3. The above amendment to ARTICLE I of the Articles of Incorporation shall be effective as of the filing date.
4. The foregoing amendment to the Articles of Incorporation of ABBOTT LAW FIRM, P.A. was adopted by the corporation by virtue of shareholder and director consent on August 1, 2009.

IN WITNESS WHEREOF, the undersigned President and Secretary of ABBOTT LAW FIRM, P.A. have executed this Amendment to the Articles of Incorporation of ABBOTT LAW FIRM, P.A. this 12th day of August, 2009.



Fred M. Abbott, President



Fred M. Abbott, Secretary

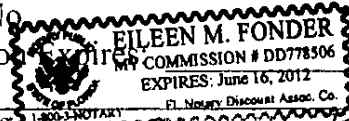
C

STATE OF FLORIDA
COUNTY OF DUVAL

The foregoing Agreement was acknowledged before me this 12th day of August, 2009, by Fred S. Abbott, as President and as Secretary of ABBOTT LAW FIRM, P.A., who is either personally known to me or produced the identification described below and who did not take an oath.

Eileen M. Fonder

Print: _____
Notary Public, State and County Aforesaid
Commission No. _____
My Commission Expires _____



Type of Identification Personally Known