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DIVISION OF CORPOR 2: 25

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COVER LETTER

TO: Amendment Section Division of Corpor	n ations		
SUBJECT: FLORIN &	ASSOCIATES, P	P.A. Corporation	
DOCUMENT NUMBER	: P11000097273		
The enclosed Articles of C	orrection and fee are s	submitted for filing.	
Please return all correspon	dence concerning this	matter to the following:	
Scott Florin Name	of Contact Person		
Florin Legal, P.A.			
	rm/Company		
4511 N. Himes Ave #20	O Address		
Tampa, FL 33614	/State and Zip Code		
sflorin@florinlegal.com	used for future annual report noti	(Contion)	
For further information co			
Scott Florin	at (813 404-1203	
Name of Contact	'erson	Area Code & Daytime Telephone Number	
Enclosed is a check for the	_		
☑ \$35.00 Filing Fee		843.75 Filing Fee & Certificate of Status	
\$43.75 Filing Fee & Ce	rtified Copy	S52.50 Filing Fee, Certificate of Status & Certified Copy	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Cli	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

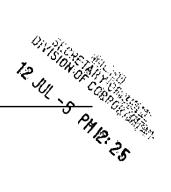
ARTICLES OF CORRECTION

for

FLORIN & ASSOCIATES, P.A.

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

P11000097273 Document Number (if known)



Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.			
These articles of correction correct Name Change Amendment (Document Type Being Corrected)			
filed with the Department of State on June 25, 2012 (File Date of Document)			
Specify the inaccuracy, incorrect statement, or defect:			
New name is incorrect and should be corrected to Florin Legal, P.A.			
Correct the inaccuracy, incorrect statement, or defect:			
Florin Legal, P.A.			

(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Scott C. Florin

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00