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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DR. YANI MCCONNELL, PLLC  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

YANITZA MCCONNELL DMD  
(Name of Person)

DR YANI MCCONNELL, PLLC  
(Firm/Company)

2400 E. LAS OLAS BLVD #179  
(Address)

FT. LAUDERDALE, FL 33301  
(City/State and Zip Code)

For further information concerning this matter, please call:

YANITZA MCCONNELL DMD at (954) 748 5741  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
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☐ \$55.00 Filing Fee &  
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☐ \$60.00 Filing Fee,  
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(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

DR YANI MCCONNELL, PLLC

(Present Name)  
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on August 4<sup>th</sup>, 2006 and assigned document number LC00007917.

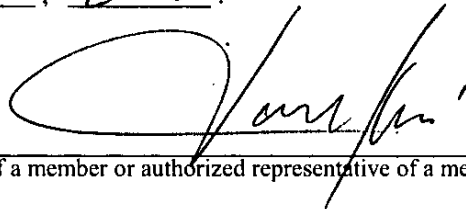
SECOND: This amendment is submitted to amend the following:

chang of NAME to the following

YANITZA MCCONNELL, DMD, PLLC

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DIVISION OF CORPORATIONS  
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Dated September 5<sup>th</sup>, 2006.



Signature of a member or authorized representative of a member

YANITZA MCCONNELL, DMD, PLLC

Typed or printed name of signee

Filing Fee: \$25.00