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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KEKKI CHIROPRACTIC, LLC
(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:

Dr. Tanya K. Kekki

(Name of Person)

KEKKI CHIROPRACTIC, LLC

(Firm/Company)

59 Uno Lago Drive

(Address)

Juno Beach, Florida 33408

(City/State and Zip Code)

For further information concerning this matter, please call:

Dr. Tanya K. Kekki

(Name of Person)

at (315) 730-3985
(Area Code & Daytime Telephone Number)

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Enclosed is a check for the following amount:



\$25.00 Filing Fee



\$30.00 Filing Fee &
Certificate of Status



\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

KEKKI CHIROPRACTIC, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on January 24, 2007 and assigned document number L07000008883.

SECOND: This amendment is submitted to amend the following:

1) Article II: New mailing address changed to:

59 Uno Lago Drive, Juno Beach, Florida, 33408

and

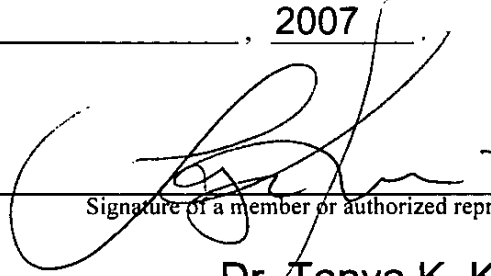
2) Article IV: Add a managing member:

MGRM: Benjamin M. Miller

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Dated May 30, 2007



Signature of a member or authorized representative of a member

Dr. Tanya K. Kekki

Typed or printed name of signee

Filing Fee: \$25.00