L08000062709

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Special Instructions to Fi	lling Officer:	,
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Amend - NC L08-62709 & BE 28 R 2:

N. CAUSSEAUX

DEC 3 0 2008

EXAMINER

COVER LETTER

· Division of Co	rporations	•	
SUBJECT: NEO S	OUL FOOD LLC		
		ited Liability Company)	. ,
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence concerning this matter to the following:			The state of the s
	YENY P. HERDOIZA		
		(Name of Person)	
	TU-BE BRANDING LLC		
		(Firm/Company)	
	20379 W COUNTRY CL		
		(Address)	
	AVENTURA, FLORIDA	33180	
	:	(City/State and Zip Code)	
For further information of	oncerning this matter, please c	all:	
YENY P. HERDOIZA		at (305) 788-9406	
(Name	of Person)	(Area Code & Daytime T	'elephone Number)
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	23\$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:

مريان يا

TO:

Registration Section

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

NEO SOUL FOOD LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Lia	were filed on 6/26/2008	. 1	and assigned	
Florida document number L08000062709	·•		<i>‡</i>	
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liab	ility company here:		
Tu-Be Branding LLC				
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," the d	lesignation "l	LLC" or the abbreviatio
Enter new principal offices address, if applicable:		20379 W COUNTRY CLUB DR, #1034		
(Principal office address MUST BE A STREET ADDRESS)		AVENTURA, FLORIDA 33180		
Enter new mailing address, if applicable:		20379 W COUNTRY CLUB DR, #1034		
(Mailing address MAY BE A POST OFFICE BOX)		AVENTURA, FLORIDA	33180	
B. If amending the registered agent and/or registered agent and/or the new registered office			rds, enter (he name of the nev
Name of New Registered Agent:	FRANK BEHRENS			
New Registered Office Address:	20379 W COUNTRY CLUB DR, #1034 (Enter Florida street address)			
				dress)
	AVENTURA		Florida 33	180
		(City)		(Zip Code)
New Registered Agent's Signature, if changing Re-	gistered Agent:			

(If Changing Registered Agent, Maneture of New Registered Agent)

Page Last

I hereby accept the appointment as registered agent and agree to act in this apacity. I further agree to comply with

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Mai MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
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			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necess	
			FILED 08 DEC 29 PH SECRETARY OF S
Dated <u>DECE</u>	MBER 16 , 2008		PH 2: 02
		or printed name of signee	, F.,

Page 2 of 2

Filing Fee: \$25.00