| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
|   |  |  |  |  |
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Office Use Only



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G. MCLEOD

JUN 2 7 2008

**EXAMINER** 

# **COVER LETTER**

| Division of             | Corporations   |
|-------------------------|--|
| SUBJECT:                | THE INCREDIBLE MINKEE LLC (Name of Limited Liability Company)  |
|                         | (Name of Limited Liability Company)  |
| •                       | ·  |
| he enclosed Article     | s of Amendment and fee(s) are submitted for filing.  |
| Please return all corre | espondence concerning this matter to the following:  |
|                         | RYAN STUART MULLER (Name of Person)  |
|                         | (Name of Person)   |
|                         | NEON BANANA (CC (Firm/Company)  301 E HWY 50 (Address)   |
|                         | (Firm/Company)   |
|                         | 301 E HWY 50   |
|                         | (Address)  |
| •                       | CLERMONT, FL 34711   |
|                         | (City/State and Zip Code)  |
| For further informati   | on concerning this matter, please call:  |
| 0400                    | ( Conner Minited (2) 329 2413  |
| (Ni                     | STUART MULLER at (607) 329 2413  (Area Code & Daytime Telephone Number)  |
| `                       |  |
| Enclosed is a check f   | or the following amount:   |
| ■ \$25.00 Filing Fee    | Certificate of Status  (additional copy is enclosed)  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

| DRYISION OF | MEN<br>NOSE<br>CODEST |
|-------------|-----------------------|
| 08 JUN 26   | AM 10: 02             |

| THE   NO<br>(Name of the Limited Li<br>(A FI   |                           |           |                 |                        | <u> </u>                 |
|--|---------------------------|-----------|-----------------|------------------------|--------------------------|
| The Articles of Organization for this Limited Liab Florida document number L 0 80000         | ility Company w           | ere filed |                 |                        | 20 P and assigned        |
| This amendment is submitted to amend the follow  | ing:                      |           | •               |                        | •                        |
| A. If amending name, enter the new name of the   | <u>ie limited liabili</u> | ty com    | nany here:      |                        |                          |
| NEON BANANA  | LLC                       |           |                 |                        |                          |
| The new name must be distinguishable and end with t "L.L.C."                                 | he words "Limite          | d Liabili | ty Company," th | ne designation "       | LLC" or the abbreviation |
|  |                           |           | :01 E           | HWY                    | 50                       |
| (Principal office address MUST BE A STREET ADDRESS)  |                           |           | LERMON          | IT , FL                |                          |
| •  |                           | 3         | 84711           |                        |                          |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO          | <u>)X)</u>                |           |                 |                        |                          |
| B. If amending the registered agent and/or registered agent and/or the new registered office |                           | e addr    | ess on our re   | ecords, <u>enter</u>   | the name of the new      |
| Name of New Registered Agent:  | <b>3</b>                  |           | .1              | <i></i>                |                          |
| New Registered Office Address:   | 301                       | E         | HWY<br>Enter E  | 50<br>lorida street ad | Idvona)                  |
|  |                           |           |                 |                        |                          |
|  | CLERMONT<br>(City)        |           |                 | , Florida              | 34 + 11                  |
|  | (City)                    |           |                 |                        | (Zip Coae)               |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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 being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

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 = N<br>MGRM = | Manager<br>= Managing Membe |                                     |                                  |                |
|-------------------|-----------------------------|-------------------------------------|----------------------------------|----------------|
| <u>Title</u>      | <u>Name</u>                 | Address                             | <u> </u>                         | Type of Action |
|                   |                             |                                     |                                  | Add            |
|                   |                             |                                     |                                  | Remove         |
|                   | <u> </u>                    |                                     |                                  | Add Remove     |
|                   |                             |                                     |                                  | Add Remove     |
|                   | <u> </u>                    |                                     |                                  | <del></del>    |
|                   |                             |                                     |                                  | Add Remove     |
|                   |                             |                                     | ,                                | Add            |
| D. If am          | ending any other inf        | ormation, enter change(s) here: (2  | Attach additional sheets, if nec |                |
|                   |                             |                                     |                                  |                |
|                   |                             |                                     |                                  |                |
| Dated             | MAY 23                      | , 2008                              |                                  |                |
|                   |                             | Signature of a member or authorized | d representative of a member     |                |
|                   |                             | RYAN STUART Typed or printed na     | MULLER                           | <del></del>    |

Page 2 of 2

Filing Fee: \$25.00