

L10000127684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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J. SAULSBERRY  
EXAMINER

SEP 19 2011

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Emiratesssssss LLC

**DOCUMENT NUMBER:** L10000127684

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donovan King

Name of Contact Person

Emiratesssssss LLC

Firm/ Company

6660 Allen Street

Address

Hollywood, FL 33024

City/ State and Zip Code

jaribean@aol.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Donovan King

Name of Contact Person

at ( 305 ) 389-3367

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Emiratesssssssss, LLC

(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 Liability Company were filed on 12/14/2010 and assigned  
Florida document number L10000127684.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

I.B.O. Holdings, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

3015 Hythe A.  
Boca Raton, FL 33434

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Melva R Rodriguez

New Registered Office Address:

3015 Hythe A

Enter Florida street address

Boca Raton

Florida

33434

City

Zip Code

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.

Rodriguez  
If Changing Registered Agent, Signature of New Registered Agent

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 = Manager

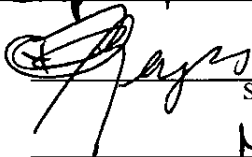
MGRM = Managing Member

| <u>Title</u> | <u>Name</u>       | <u>Address</u>                        | <u>Type of Action</u>                                                      |
|--------------|-------------------|---------------------------------------|----------------------------------------------------------------------------|
| MGRM         | Yuniel Reyes      | 6660 Allen St.<br>Hollywood, FL 33021 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| MGRM         | Melva R Rodriguez | 3015 Hythe A.<br>Boca Raton, FL 33431 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                   |                                       | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                   |                                       | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                   |                                       | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                   |                                       | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Email IBO.Holdings@gmail.com.

Dated Sept 15, 2011.



Signature of a member or authorized representative of a member

MGRM

Typed or printed name of signee

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