L20000331045

(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:
Amendment

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FILED
2025 FEB 19 AM 8:08
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: IB ONE 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:

Lore Escuret
Name of Person

IB ONE LLC
Firm/Company

531 NE 71st St Unit 1
Address

MIAMI FL 33138
City/State and Zip Code

lore.escuret@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lore Escuret at (754) 2764980
Name of Person — Area Code — Daytime Telephone Number

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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

DS PhT Initial EL

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

IB ONE LLC

2025 FEB 19 AM 8:08

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

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 10/19/2020 and assigned Florida document number L20000331045.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

98 Indian Trace
Weston FL 33326

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

531 NE 71st
Unit 1
Miami FL 33138

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: Lore Escuret

New Registered Office Address: 531 NE 71st St Unit 1
Enter Florida street address

MIAMI, **Florida** 33138
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 605, 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.

Signed by:
DFB37971E8634D9...

If Changing Registered Agent, Signature of New Registered Agent

DS
PhT

If amending Authorized Person(s) authorized to manage, **enter the title, name, and address of each person being added or removed from our records:**

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Hadri Jaffal	1034 E Brandon Blvd Ste 163	☐ Add
		Brandon FL 33511	■ Remove
			☐ Change
AMBR	IRON BODYFIT USA INC	1034 E Brandon Blvd Ste 163	☐ Add
		Brandon FL 33511	■ Remove
			☐ Change
MGR	Lore Escuret	531 NE 71st St	■ Add
		Unit 1	☐ Remove
		MIAMI FL 33138	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

DS PhT Initial EL

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

E. Effective date, if other than the date of filing: 02/12/2025 **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated February 12th . 2025 .

DocuSigned by:

05CB122DC98A40E...

Signature of a member or authorized representative of a member

Philippe VIGOUROUX

Typed or printed name of signee

Initial EL

Filing Fee: $25.00