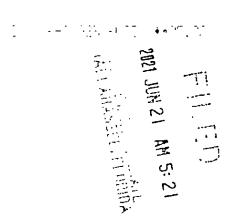


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:







COVER LETTER

TO:

Registration Section

Division of Co	rporations			
IB FIVE L	LC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Hadrí JAFFAL			
		Name of Person		
	IRON BODYFIT USA IN	C		
	 	Firm/Company		
	20200 W Dixie Hwy, Ste	1201		
		Address		
	Miami, FL 33180			
		City/State and Zip Code		
	usa@ironbodyfit.com		-16	
e e a te list		to be used for future annual report no	uncation)	
	concerning this matter, please c			
Gregoire Lainey		305 951-1947 at ()		
Name c	of Person	Area Code Daytit	ne Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre		<u>Street Address:</u> Registration So	ection	
Division of Corporations		Division of Co	rporations	
P.O. Box 631 Tallahassee,		The Centre of 2415 N. Monre	Tallahassee oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IB FIVE LLC					
(Name of the Limi	ted Liability Compa (A Florida Limited	nny as it now appears on our reco Liability Company)	rds.)		
The Articles of Organization for this Limited I Florida document number <u>L21000153803</u>	iability Company	were filed on 04/02/2021	and assigned		
his amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name o	of the limited liah	oility company here:			
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LI	.C" or the abbreviation "L.L.C."		
Inter new principal offices address, if applicable:		20200 W Dixie Hwy			
Principal office address MUST BE A STREET ADDRESS)		Ste 1201			
		Miami, FL 33180	~		
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)		20200 W Dixie Hwy	PRI JUII		
		Ste 1201	2 7		
		Miami, FL 33180			
3. If amending the registered agent and/or gent and/or the new registered office addre	~	address on our records, <u>entc</u>	er the name of the now register		
Name of New Registered Agent:	IRON BODYFIT USA INC				
New Registered Office Address:	20200 W Dixie	: Hwy, Ste 1201			
		Enter Florida street addr	ess		
	Miami		Florida		
		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.

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	IRON BODYFIT USA INC	20200 W Dixie Hwy, Ste 1201	
		Miami, FL 33180	□Remove
			□Change
AMBR	HEITZ. Stephanie	38 Quai de l'Ill	≣ Add
		67400 Illkirch-Graffenstaden	□Remove
		France	□Change
MGR	JAFFAL, Hadri	20200 W Dixie Hwy. Ste 1201	Zin
		Miami, FL 33180	77 PROVE
			227 July 2 Amove 21
			□Add
			□Change
			□Add
			□Remove
			□Change
 	~		□Add
			□Remove
			□Change

The purpose of IB FIVE LLC is	to operate and conduct	all business activitie	s legally permitte	:d	
in the state of Florida.				<u></u>	
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tive date, if other than the da ffective date is listed, the date must be If the date inserted in this block nent's effective date on the Depa	specific and cannot be pri- does not meet the appl	or to date of filing or mo icable statutory filing	(opt ore than 90 days after t requirements, th	er filing.) Pu	rsuant to 605 I not be list
rd specifies a delayed effective da iled.	te, but not an effective	time, at 12:01 a.m. c	on the earlier of: ((b) The 90)th day afte
06/14/671		_			
	nature of a member we aut	- 1165	<u> </u>		
215	iature of a memiteror aut	norizca representative	or a memper		