## P21000069608

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: IRON BODYFIT I	FRANCHISING INC.		
DOCUMENT NUM	P21000069608			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	Hadri JAFFAL			
		Name of Contact Person		
	Iron BodyFit USA Inc.			
		Firm/ Company		
	20200 W Dixie Hwy, Ste 120	)1		
		Address		
	Miami, FL 33180			
		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
	greg@ironbodyfit.com			
		sed for future annual report	notification)	
For further informati Gregoire Lainey	ion concerning this matter, pleas	se call: at (	951 1947	
Name	e of Contact Person	Area Cod	le & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section			Address ment Section	
Di	vision of Corporations	Division of Corporations		
	O, Box 6327 Illahassee, Ft. 32314		ntre of Tallahassee !. Monroe Street, Suite 810	
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Tallahassee, Fl. 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as o	currently filed with the F	lorida Dept. of State)	
P21000069608			
(Document N	umber of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	tes, this <i>Florida Profit Co</i>	rporation adopts the following	amendment(s) to
A. If amending name, enter the new name of the corpora	ntion:		
			The new
name must be distinguishable and contain the word "corpora "Inc.," or Co.," or the designation "Corp," "Inc," or " "chartered," "professional association," or the abbreviation	"Co". A professional coi	orporated" or the abbreviation rporation name must contain	a "Corp.," the word
B. Enter new principal office address, if applicable:			<u> </u>
(Principal office address MUST BE A STREET ADDRESS	$\Sigma$ )		
			2021 0 27 12 PH 2: 33
			<u> </u>
			- 14 in
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			12
(Matting unaress MAT BE A POST OFFICE BOX)		<del></del>	<del></del>
			?
			:చ
D. If amending the registered agent and/or registered off	fice address in Florida, er	iter the name of the	
new registered agent and/or the new registered office		<del></del>	
None of None Designated Language			
Name of New Registered Agent			
$\epsilon F$	lorida street address)		
New Registered Office Address:		. Florida	
Men Meginered Mine . Man con.	(City)	(Zip C	ode)
New Registered Agent's Signature, if changing Registered	d Agent:		
I hereby accept the appointment as registered agent. I am fo		a abligations of the position	

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

$\underline{X}$ Change	<u> 17.</u>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action Check One)	<u>Title</u>	Name	<u>Addres</u> s
X Change	P	JAFFAL, Hadri	20200 W Dixie Hwy
Add			Stc 1201
Remove			Miami, FL 33180
) Change	V	LAINEY, Gregoire	6325 SW 84th St
X Add			Miami, Ft. 33180
Remove	S	RUIZ, Lizzette	1300 NE Miami Gardens Dr
X Add			Apt 410
Remove			North Miami Beach, FL 33179
) Change			
Add			
Remove			
Change		<del>-</del>	
Add			
Remove			
Change		<del></del>	
Add			
Remove			

Attach <i>additional shee</i>	us, if necessary).	icles, enter char (Be specific)				
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f an amendment pro- provisions for imple (if not applicable	menting the ame	nange, reclassifi endment if not c	cation, or canco	ellation of issued s amendment itsel	shares, f:	<u> </u>
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The date of each amendment(s	) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, t Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholds	er action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amend e sufficient for approval.	ment(s)
	approved by the shareholders through voting groups. The following s for each voting group entitled to vote separately on the amendment(s)	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated 10 / 0	1 / 2021	
Signature	Hadri Jaffal	
(By a selec	a director, president or other officer – if directors or officers have not cted, by an incorporator – if in the hands of a receiver, trustee, or othe binted fiduciary by that fiduciary)	
	Hadri JAFFAL	
	(Typed or printed name of person signing)	
	President and Incorporator	

(Title of person signing)

## Signature Certificate

Document Ref. UA9MB-KPSNQ-7MVDP-FBMIK

Document signed by:



Document completed by all parties on: 05 Oct 2021 12:46:45 UTC Page 1 of 1



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