## L23000475966

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## **COVER LETTER**

Division of Co	rporations					
SUBJECT:	MV	'S 2000 LLC				
SUBJECT:Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sui	omitted for filing.				
Please return all correspond	ondence concerning this matter	r to the following:				
		VICKY SCHAFFNER				
		Name of Person	<del> </del>			
	MVS 2000 LLC					
Firm/Company						
3000 PRESIDENTIAL WAY501						
Address						
	WEST PALM BEACH, FL 33401					
		City/State and Zip Code	<del></del>			
		ectoriferran@gmail.com				
	E-mail address:	to be used for future annual report noti	fication)			
For further information of	concerning this matter, please of	all:				
MARIA V. SCHA	FFNER	561 413-83				
Name of Person		Area Code Daytim	e Telephone Number			
Enclosed is a check for the	he 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)			
Malling Adda.	_	Sa A 4 b				

Mailing Address:

TO:

Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	MVS 2000 LLC		
(Name of the Limited I	lability Company as it now appears on our forida Limited Liability Company)	records)	<del> </del>
he Articles of Organization for this Limited Liabilorida document number L23000475966	lity Company were filed on October 1	7,2023	and assigned
his amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company here:		
he new name must be distinguishable and contain the words	s "Limited Liability Company," the designation	on "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:		
Principal office address MUST BE A STREET A	(DDRESS)	<del> </del>	-1
Inter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BO	x)		
			, in
<ol> <li>If amending the registered agent and/or registered office address h</li> </ol>		, <u>enter the na</u>	me of the new regist
Name of New Registered Agent:	MARIA V. SCHAFFI	VER	
New Registered Office Address:	3000 PRESIDENTIAL	WAY501	
* 1 = Tr + mail and adventum - M - degree   VMA- ANM	Enter Florida stree	et address	
	WEST PALM BEACH	, Florida _	33401
<u></u>	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>	Name	Address	Type of Action
MGR	MARIA V. SCHAFFNER	3000 PRESIDENTIAL WAY501	■ Add
		WEST PALM BEACH 33401	□Remove
			□ Change
			□ Add
			□Remove
			□ Change
<del></del>			□Add
			□Remove
			□Change
<del>,</del>			□ <b>Add</b>
			□Remove
			□Change
<del></del>			
			□Remove
			□Change
			□ Add
			□Remove
			<b>M</b> CL

f amending any other info	rmation, enter ch	ange(s) here: (	Attach additiona	l sheets, if neces:	sary.)
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ffective date, if other than an effective date is listed, the date ote: If the date inserted in the ocument's effective date on the ocument's effective date.	is block does not m	eet the applicable	ate of filing or more statutory filing re	(option than 90 days after fil quirements, this d	al) ing.) Pursuant to 605.0207 ( ate will not be listed as t
record specifies a delayed effi	ective date, but not a	an effective time,	 at 12:01 a.m. on t	he earlier of: (b)	The 90th day after the
ated November	3rd	2023			
	, _/	Me			
	Signature of a m	ember or authorize	d representative of a	member	
$\mathcal{M}_{\cdot}$	oria 1/	$\lesssim$	making all		
	u.io. V.	Typed or printed na	une of signee		