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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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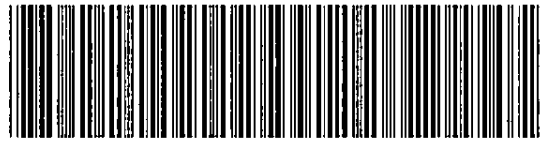
(Business Entity Name)

(Document Number)

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JESSIE FL

R. HUNT
03/08/24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MVMB VENTURES, 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:

MICHAEL BEILINE

Name of Person

BEILINE CONSULTING INC.

Firm/Company

150 EAST PALMETTO PARK RD. SUITE 404

Address

BOCA RATON, FL 33432

City/State and Zip Code

BEILINEMICHAEL@GMAIL.COM

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

For further information concerning this matter, please call:

MICHAEL BEILINE

786 271-7815

at ()

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MVMB VENTURES, 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 FEBRUARY 12, 2024 and assigned
Florida document number L24000074820.

This amendment is submitted to amend the following:

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

EMBEI INTERNATIONAL VENTURES, LLC

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)

150 EAST PALMETTO PARK RD.

SUITE 404

BOCA RATON, FL 33432

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

150 EAST PALMETTO PARK RD.

SUITE 404

BOCA RATON, FL 33432

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:

MICHAEL BEILINE

New/Registered Office Address:

150 EAST PALMETTO PARK RD. SUITE 404

Enter Florida street address

BOCA RATON

Florida 33432

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>	<u>Address</u>	<u>Type of Action</u>
MGR	MICHAEL BEILINE	150 EAST PALMETTO PARK RD.	<input checked="" type="checkbox"/> Add
		SUITE 404	<input type="checkbox"/> Remove
		BOCA RATON, FL 33432	<input type="checkbox"/> Change
MGR	MICHAEL VINOKUR	1950 NE 163 STREET	<input type="checkbox"/> Add
		MIAMI, FL 33160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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NOTARY STATE
COMMISSIONER, FL
JAN 10 2011 AM 6:44

2004-11-08 AM 6:44
STATE
VAN SEEL FL

2004-11-18 AM 5:44
STATE
FL

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.

Dated March 4 2024

MICHAEL BEILINE
Typed or printed name of signer

Filing Fee: \$25.00