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## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: MVM Custom Hot	mes Inc	
DOCUMENT NUM	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Mikhail Margitich		
		Name of Contact Persor	1
	MVM Custom Homes Inc		
		Firm/ Company	
	1053 Savia Street		
		Address	
	North Port Florida 34287		
		City/ State and Zip Code	•
	mvmch941@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Mikhail M Margitich		at (	_) 258-7332
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	
P04000093609		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607-1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendm	ient(s) to
A. If amending name, enter the new name of the corporation: $N\!/\!A$	The nev	
name must be distinguishable and contain the word "corporation." "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the work	 d
B. Enter new principal office address, if applicable:	MVM Custom Homes Inc	
(Principal office address MUST BE A STREET ADDRESS)	1053 Savia Street	
	North Port FL 34287	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MVM Custom Homes Inc	
	1053 Savia Street	
	North Port FL 34287	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		<u> </u>
Name of New Registered Agent N/A		
	Mc, ▶	$\overline{\Box}$
tFlorida :	street address)	السا
New Registered Office Address:		
	-	
New Registered Agent's Signature, if changing Registered Age	nt:	
I hereby accept the appointment as registered agent. I am familia.	r with and accept the obligations of the position.	
Sumarture of Van	Registered Agent, if changing	
ingulative of even	reguleren ogenen ennignig	

Check if applicable

MVM Custom Homes Inc

[] 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.

Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VPT	Nadia Margitich	3659 Weidman Ave
Add			North Port FL 34286
X Remove			
2) Change	D	Mikhail M Margitich	1053 Savia Street
X Add			North Port FL 34287
Remove 3 ) Change			
Add			
Remove			
4) Change			7022
Add			<del></del>
Remove			ASSE
5) Change			
Add			
Remove			32 IDA
6) Change			
Add			
Remove			

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an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	<u> </u>

. . .

m	June 20,2022	, if other than the
The date of each amendment(s) addate this document was signed.	option:	, it offer than the
June Effective date if applicable:	20, 2022	
	(no more than 90 days after amendment file da	te)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adoptection was not required.	sted by the incorporators, or board of directors without share	eholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for the a ficient for approval.	imendment(s)
☐ The amendment(s) was/were appromist be separately provided for e	oved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amendm	POZZ JUN 30 FILL AHASS
	or the amendment(s) was/were sufficient for approval	FILED 22 JUN 30 AM IO: 33 LLAHASSEE, FLURIDA
by	(voting group)	AM ID: 33
June 22, 20 Duted	22	9: 33 Still A
Signature	(d) 43/	
selected	ector president or other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, of diductary by that fiductary)	
	Mikhail Margitich	
-	(Typed or printed name of person signing)	
	Director	
-	(Title of person signing)	