P24000064465

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COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: MVM PROPERTI	ES CORP.			
P24000064465					
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ndence concerning this ma	tter to the following:			
_		SONIA BOTERO			
		Name of Contact Person	n		
	IONS INC				
-	Firm/ Company				
	1395 BRICKELL AVE STE 800				
_	Address				
	MIAMI, FL 33131				
_		City/ State and Zip Code	c		
		master@jpgbusiness.com	π		
_	E-mail address: (to be us	sed for future annual report	notification)		
For further information c	oncerning this matter, plea	se cull:			
SONIA BOTERO		at (305	359.3700		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for th	ne following amount made	payable to the Florida Depo	artment of State:		
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 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	Address Iment Section on of Corporations		

Articles of Amendment to Articles of Incorporation of

to

MVM PROPERTIES CORP.

	PROPERTIES CORP.	
(Name of Corporation as	s currently filed with the Flo	orida Dept. of State)
P240	000064465	
(Document	Number of Corporation (if kn	own)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	atutes, this <i>Florida Profit Corp</i>	poration adopts the following amendment(
A. If amending name, enter the new name of the corpo	oration:	
		The new
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviati	"Co". A professional corr	rporated" or the abbreviation "Corp.," poration name must contain the word
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u></u>	· ·
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		er the name of the
new registered agent and/or the new registered offic	ce address.	
Name of New Registered Agent		-
	(Florida street address)	
New Registered Office Address:		, Florida
HEW MEXISTED OFFICE NAMES.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register		
I hereby'accept the appointment as registered agent. I am	n familiar with and accept the	obligations of the position.
Signature	e of New Registered Agent, if	changing
•	<u>-</u>	-
Check if applicable	0130 (11) (=)	
☐ The amendment(s) is/are being filed pursuant to s. 607.	.0120 (11) (c), 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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	MARAA D HUESCA FERNANDEZ	111 SW 3RD ST SUITE 301
Add			MIAMI, FL 33130
X Remove	D	MARIA D HUESCA FERNANDEZ	111 SW 3RD ST SUITE 301
2) Change X Add		MAKIA D HOLSEN I EKONOSES	MIAMI, FL 33130
Remove 3) Change			
Add			
Remove			
4) Change Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

•

The date of each amendment(s) a	ioption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date,)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amifficient for approval.	endment(s)
	proved by the shareholders through voting groups. The followin each voting group entitled to vote separately on the amendmen	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	99	
	(voting group)	
Dated	10/18/2024	
Signature	10mgs 4. Francisco	
• •	rector, president or other officer - if directors or officers have	
	 d, by an incorporator – if in the hands of a receiver, trustee, or of ted fiduciary by that fiduciary) 	outer court
	MARIA DEL CARMEN HUESCA FERNANDEZ	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	