## 116000066088

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO:

ΓΟ: Registration So Division of Cor			
SUBJECT: Xpert	Asset Management	. LLC	
Object:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Xeniya McBroom	
		Name of Person	
	Xpert	Asset Management, l	LLC
		Firm/Company	
		912 Edgedale Cir	
		Address	
	Ε	Brandon, FL, 33510	
		City/State and Zip Code	
	E mail address:	xentet@gmail.com to be used for future annual report no	tification \
For further information c	oncerning this matter, please o	•	ancaton)
Xeniya Mc	Broom	at (813) 335-	2765
Name o	f Person	Area Code Daytir	me Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address: Registration Sc	ection
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		The Centre of 2415 N. Monro	Tallahassee oe Street, Suite 810
rananassee, i	. L. J. J. T	Tallahassee, Fl	•

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Xpert Asset Management, LLC 22 6:47

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 4/04/2016 The Articles of Organization for this Limited Liability Company were filed on \_\_\_ Florida document number \_\_L16000066088 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) 912 Edgedale Cir, Brandon, FL, 33510 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Llewyn McFarlane Name of New Registered Agent: 912 Edgedale Cir New Registered Office Address: Enter Florida street address \_, Florida <u>33510</u> Zip Code Brandon

## 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>	Address 22 22 25 6:47	Type of Action
<u>AMB</u> R	Llewyn McFarlane	912 Edgedale Cir, Brandon, FL	<b>⊠</b> Add
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fan eff <u>Note:</u>	ve date, if other than the date of filing:
record d is fil	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	September 20th 2021
	Xervige McBroom Signature of a member or authorized representative of a member
	V * * * * * * * * * * * * * * * * * * *
	Signature of a number or authorized representative of a member