## L16000066088

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## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT:	Xpert Asset Manag	gement, LLC	
SUBJECT:		ited Liability Company	<del></del>
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Xeniya McBroom	
		Name of Person	
	Xpert /	Asset Management, LL	С
		Firm/Company	
		2012 Ronald Cir	
		Address	
	<del></del>	Seffner, FL, 33584	
		City/State and Zip Code	
		xentet@gmail.com to be used for future annual report no	itification)
For further information	concerning this matter, please c	all:	
Xeniya	a McBroom	<sub>at (</sub> 813 <sub>)</sub> 335-	2765
Name	of Person		me 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 Addre Registration Division of O P.O. Box 63	Section Corporations	Street Address: Registration S Division of Co The Centre of	orporations
Tallahassee,			oe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

×P <sub>1</sub>	ert Asset Manageme	nt, LLC			
(Name of the Limite	d Liability Company as it now A Florida Limited Liability Com	appears on our repany)	cords.)	<del></del>	
The Articles of Organization for this Limited Lia Florida document numberL16000066086		on <u>4/4/20</u>	116	and assig	уı <b>e</b> d
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liability compa	nny here:			
The new name must be distinguishable and contain the wo	ords "Limited Liability Company.	"the designation	"LLC" or the ab	breviation "L.L.	.C."
Enter new principal offices address, if applica	ble: 2012	Ronald Ci	r, Seffner,	FL 33584	
(Principal office address MUST BE A STREE)	<u> </u>			·	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office as agent and/or the new registered office address here:		Ronald Cir,		TALLAHAS fhe new	3
Name of New Registered Agent:	Xeniya McBroo	<u>m</u>		TATE	7
New Registered Office Address:	2012 Ronald C	ir er Flonda street a	ddress		
	Seffner		_, Florida	33584	
	Спу			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>	Address	Type of Action
AMBR	Liewyn McFarlane	912 Edgedale Cir, Brandon, FL, 33516	O □Add
			<b>⊠</b> Remove
			□Change
AMBR	Xeniya McBroom	2012 Ronald Cir, Seffner, FL 33584	<b>X</b> IAdd
			□Remove
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an effectiv ote: If th	date, if other than the date e date is listed, the date must be space date inserted in this block d is effective date on the Department	secific and cannot be prior to oes not meet the applicate	o date of filing or more the ble statutory filing rec	optional (optional han 90 days after filing quirements, this dat	g.) Pursuant to 605,020
record spe is filed.	ecifies a delayed effective date	, but not an effective tim	ie, at 12:01 a.m. on th	ne earlier of: (b) T	the 90th day after the
ated	10/27/2022	2022			
		X Brigge J	Ucknoom		
	Signa	iture of a member or authori	ized representative of a	member	
		Xeniya M			

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