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COVER LETTER

TO:

	egistration Se livision of Cor					
end ie ca	Alex Jones	Management LLC				
SUBJECT:Name of Limited Liability Company						
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retu	ırn all correspo	ondence concerning this matter	to the following:			
		Alex Jones				
			Name of Person			
			Firm/Company			
		608 NE 29th Drive #1				
		W/I. M. Pl 23234	Address			
		Wilton Manors FL 33334	City/State and Zip Code	·		
		managexpat@gmail.com	enymate and my code			
		E-mail address: (to be used for future annual report not	ification)		
For further	r information c	oncerning this matter, please co	all:			
Alex Jones Name of Person		at (786 928) Area Code Daytin	-9400 ne Telephone Number			
Enclosed is	s a check for th	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 Address: Registration Section		Street Address: Registration Se	ection			
Division of Corporations		Division of Cor	Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Alex Jones Management LLC

(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our re Liability Company)	<u>cords.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L21000126305	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Xpat Management & Vacation Rentals LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "	*LLC" or the abbreviation "L.L. & Control of the abbreviation" "L.L. & Control of the abbreviation "L.
Enter new principal offices address, if applicable:	608 NE 29th Drive #1	22 S
(Principal office address MUST BE A STREET ADDRESS)	Wilton Manors FL 33334	10 22
(Finicipal office address most be A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		
	Enter Florida street ac	ldress
		, Florida
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties provided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
		<u> </u>	□Change
			□Add
			Remove
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			U man □Remove Six
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		v 000	□Remove
			☐ Change
			□Add
			Remove
			□ Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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E. Effective date, if other than the date of filing:		
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aftercord is filed.	er the	
Dated 8/29/2022		
Signature of a member or authorized representative of a member		
Alex Jones		
Typed or printed name of signee		

Filing Fee: \$25.00