

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000081458

**Entity Name:** OLYMPIA PRODUCTS LLC

**Current Principal Place of Business:**

501 S. ANDREWS AVE.  
FT. LAUDERDALE, FL 33301

**Current Mailing Address:**

501 S. ANDREWS AVE.  
FT. LAUDERDALE, FL 33301 US

**FEI Number:** 26-3364149

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SHAPIRO, JEFFREY B  
200 SOUTH BISCAYNE BOULEVARD  
SUITE 3600 C/O ARNSTEIN & LEHR LLP  
MIAMI, FL 33131 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** JEFFREY B. SHAPIRO

**04/02/2015**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            FELKOWITZ, STEVEN A.  
Address        501 S. ANDREWS AVE.  
City-State-Zip: FT. LAUDERDALE FL 33301

Title            VP  
Name            SUTKER, MARTIN  
Address        501 S. ANDREWS AVE.  
City-State-Zip: FT. LAUDERDALE FL 33301

Title            TREASURER  
Name            BONET, NOEL  
Address        501 S. ANDREWS AVE.  
City-State-Zip: FT. LAUDERDALE FL 33301

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STEVEN A. FELKOWITZ

**PRESIDENT**

**04/02/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date