

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000046877

**Entity Name:** OLLIE'S SOLUTIONS LLC

**Current Principal Place of Business:**

1175 E LANCEWOOD PLACE  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

1175 E LANCEWOOD PLACE  
DELRAY BEACH, FL 33445

**FEI Number:** 45-4979893

**Certificate of Status Desired:** No

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

OLIZAROWICZ, SHAWN P  
1175 E LANCEWOOD PLACE  
DELRAY BEACH, FL 33445 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name OLIZAROWICZ, SHAWN P  
Address 1175 E LANCEWOOD PLACE  
City-State-Zip: DELRAY BEACH FL 33445

Title MGRM  
Name LAMBERTSON, BRITTANY  
Address 611 E WOOLBRIGHT RD A203  
City-State-Zip: BOYNTON BEACH FL 33435

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHAWN OLIZAROWICZ

MGRM

03/22/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date