

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000004621

Entity Name: OLYMPIA PARTNERS LLC**Current Principal Place of Business:**14139 SAPPHIRE BAY CIR
ORLANDO, FL 32828**Current Mailing Address:**14139 SAPPHIRE BAY CIR
ORLANDO, FL 32828 US**FEI Number:** 47-2747200**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CRUZ LUPO, ADRIANO
14139 SAPPHIRE BAY CIR
ORLANDO, FL 32828 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	AMBR
Name	CRUZ LUPO, ADRIANO
Address	14139 SAPPHIRE BAY CIR
City-State-Zip:	ORLANDO FL 32828
Title	MGR
Name	CUNHA, SANDRO LUIZ
Address	RUA CASA DO ATOR 985 APT 83
City-State-Zip:	SAO PAULO SP 04546-003

Title	AMBR
Name	COMPATANGELO JUNIOR, ENZO PAULO
Address	RUA GOMES DE CARVALHO 781 APT 502
City-State-Zip:	SAO PAULO SP 04547-003
Title	AMBR
Name	MANFIO DE OLIVEIRA , ANDRÉ
Address	RUA DR MANOEL DE PAIVA RAMOS 345 AP 13
City-State-Zip:	SAO PAULO SAO PAULO 05351-015

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: CRUZ LUPO , ADRIANO

AMBR

03/15/2017

Electronic Signature of Signing Authorized Person(s) Detail_____
Date