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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

APR 8 2009

EXAMINER

KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES, P.A.

ATTORNEYS AND COUNSELORS AT LAW

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⁴ ALSO MEMBER OF MARYLAND BAR
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POST OFFICE BOX 1913
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OF COUNSEL
CHRISTOPHER W. HAYES
BRENDA J. NEWMAN

Sender's email address:
ktountas@kpsos.com

March 31, 2009

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Olympia Investments, LLC
Document No. L09000029334
Our File No. 710801

Dear Sir/Madam:

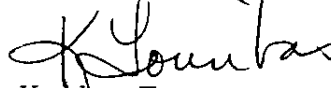
Pursuant to the above referenced matter, enclosed please find:

1. Cover letter with Articles of amendment to Articles of Organization, which amends the spelling of a Manager's name.
2. Our firm Trust Account Check No. 10340 in the amount of \$25.00 which represents your fee.

Please return notification of change in the envelope enclosed for your convenience. Should you have any questions or need additional information, please call.

Sincerely,

KILLGORE, PEARLMAN, STAMP,
ORNSTEIN & SQUIRES, P.A.



Kathleen Tountas

Assistant to Timothy L. Durocher, Esquire

Enclosures

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Olympia Investments, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Timothy L. Durocher, Esq.
(Name of Person)

Killgore Pearlman Stamp Ornstein & Squires, P.A.
(Firm/Company)

2 South Orange Avenue, 5th Floor
(Address)

Orlando, Florida 32801
(City/State and Zip Code)

For further information concerning this matter, please call:

Timothy L. Durocher, Esq. at (407) 425-1020
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

OLYMPIA INVESTMENTS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MARCH 25, 2009 and assigned Florida document number L09000029334.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

(Enter Florida street address)

, Florida

(City)

(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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

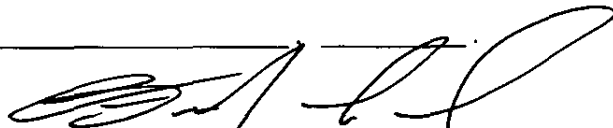
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SALAS, SYLVIA B	7852 MURCOTTE CIRCLE ORLANDO, FLORIDA 32835	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	BERMUDEZ SALAS, SILVIA	7852 MURCOTTE CIRCLE ORLANDO, FLORIDA 32835	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____



Signature of a member or authorized representative of a member

Typed or printed name of signee

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