

L11000024214

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

S. WARREN

DEC 01 2017

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** OLYMPIC CAPITAL LLC  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

JOSEPH V. PULEO

Name of Person

OLYMPIC CAPITAL LLC

Firm/Company

1645 Palm Beach Lakes Blvd. Suite 1200

Address

West Palm Beach, Florida 33401

City/State and Zip Code

jp.olympiccapital@outlook.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH V. PULEO

at ( 561 ) 547-4241  
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

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

**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

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

OLYMPIC CAPITAL 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 02/25/2011 and assigned  
Florida document number L11000024214.

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 contain 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)

1645 Palm Beach Lakes Blvd, Suite 1200

West Palm Beach, Florida 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1645 Palm Beach Lakes Blvd, Suite 1200

West Palm Beach, Florida 33401

**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:

1645 Palm Beach Lakes Blvd, Suite 1200

*Enter Florida street address*

West Palm Beach

Florida

33401

*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 605, 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:**

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TALLAHASSEE, FLORIDA

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	PHILIP ANGELO PULEO	1645 Palm Beach Lakes Blvd. Suite 1200	<input type="checkbox"/> Add
		West Palm Beach, Florida 33401	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	JOSEPH VINCENT PULEO	1645 Palm Beach Lakes Blvd. Suite 1200	<input type="checkbox"/> Add
		West Palm Beach, Florida 33401	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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SOUTHERD DISTRICT OF FLORIDA

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

[illegible]

**F. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 after the record is filed.

Dated \_\_\_\_\_

Signature of a member or authorized representative of a member

JOSEPH VINCENT PULEO

Typed or printed name of signee

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