

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

29682

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

REC AMND/RESTATE/CORRECT OR M/MG RESIGN
OLYMPUS MARINE MECHANICAL ENGINEERING
LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

D. SCOTT
AUG 23 2017

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

OLYMPUS MARINE MECHANICAL ENGINEERING, 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 April 18th 2017 and assigned
Florida document number L15000194319

This amendment is submitted to amend the following:

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

OLYMPUS SUPPLY, LLC

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**)

2021 HAYES STREET
HOLLYWOOD, FL 33020

Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

2021 HAYES STREET
HOLLYWOOD, FL 33020

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 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

If unloading 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>
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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 600.6207 (3)(c)
 Note: If the date entered 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

DATE AUGUST 21ST 2017

Signature of _____

Signature of a member or authorized representative of a member

THEODOROS VOUGIOUKLAKIS

Typed or printed name of signer

Filing Fee: \$25.00