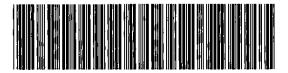
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· (Red	questor's Name)	
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COVER LETTER

	ision of Corp				
SUBJECT:	Olympia Re	alty, LLC			
SOBJECT.			ited Liability Company		
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspon	ndence concerning this matter	to the following:		
		Joseph DeFalco			
			Name of Person		
Olympia Realty, LLC					
		Firm/Company			
4 SE 6th Ave.					
		Address			
Delray Beach, Fl. 33483					
			City/State and Zip Code		
		exitrealtypalms@gmail.com	to be used for future annual report notifi	antian)	
For further in	nformation co	oncerning this matter, please co	·	Cation	
Joseph DeFa	alco		561 3526759 at ()		
	Name of	f Person	Area Code Daytime	Telephone Number	
Enclosed is	a check for th	ne following amount:			
■ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Olympia Realty, LLC				
(Name of the Lim	ted Liability Company as (A Florida Limited Liabili	it now appears on our records.) by Company)		
The Articles of Organization for this Limited I. Florida document number L16000080551			and assi	gned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability of	company here:		
The new name must be distinguishable and contain the	words "Limited Liability Co	mpany," the designation "LLC" or the at	breviation "L.L	.C."
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)		7 7	
			PR	44
			20	
Enter new mailing address, if applicable:			2	
(Mailing address MAY BE A POST OFFICE	BOX)		Ņ	ii S
			- E	<u>_</u>
B. If amending the registered agent and	_	address on our records, enter	the name o	f the ne
registered agent and/or the new registered of	flice address here:			
Name of New Registered Agent:	Chris Chames			
New Registered Office Address:	4 SE 6th Ave			
		Enter Florida street address		
	Delray Beach	, Florida ³³	483	
		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 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>	Address	Type of Action
MGR	Joseph DeFalco	10555 Oak Meadow Lane	Add
		Lake Worth, Fl 33449	■ Remove
			□ Change
			Add
			□ Remove
			□ Change
			Add
			□ Remove
			☐ Change
			□ Add
			Remove
			☐ Change
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	ve date, if other than the date of filing: 4/21/2017 (optional)	
fan effe <u>Note:</u> I	ctive 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 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be limt's effective date on the Department of State's records.	605.0207 listed as
an effe Note: I locume	ctive 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 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be l	listed as
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fan effe Note: I locume e reco	ctive 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 a fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be limit's effective date on the Department of State's records. Ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea 90th day after the record is filed.	listed as
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Page 3 of 3

Filing Fee: \$25.00