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Division of Corporations

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From:

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Account Number : I2009000081 : (307)200-2803 Fax Number : (813)436-5206

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company: OLYMPO L&S LLC	C	<u>.</u>		
2 (21		(b)			
2. (11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	7901 4th St N STE 300		7901 4th St	N STE 300	
	St. Petersburg FL 33702	St. Peterst		burg FL 33702	
	03/20/24	L	2400013707	72	
3.	Date of filing/registration in Florida	- 4		Document number	
5 (0)	URIBE ROA, JUAN S, SR.				
5. (a)	Registered Agent and Registered Office shown on the records of t	the Florida L	Dept. of State:		
	4596 SW 139CT			\[\frac{1}{2} \f	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		25 F		
	APT B			FIL 2025 FEB -4 SECRITADO PALLAHASSI	
	MIAMI , FL	33175			
(b)					
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			9:08 PATE ORIDA	
	7901 4th St N				
	NEW Registered Office Address:				
	STE 300	·			
	St. Petersburg , FL	33702			
the cha agent v was/we the arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registed bility con If the limit	ered office ipany, it is ed liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
	MWT SMITH ture of a member or authorized representative of a member			Nat Smith	
				Printed or typed name of signee	
provisi the obli to mere notifice	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete pligations of my position as registered agent as provided live reflect a change in the registered office address. I had in writing of this change.	performai d för in Cl tereby cor	n this capa nce of my d naptèr 605, yirm that ti	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
Signatu	Taylor Newman - Assistant Se	ecretary			