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## LLC REGISTERED AGENT CHANGE OLYMPIAN INVESTMENT MANAGEMENT, LLC

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A. LUNT

OCT 28 2011

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## fox and if #-H110002571983

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

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Olympian Inve	stment Management, LLC		
2. (a) Principal office address of limited liability company	One East Broward Blvd., Suite 700		
(Note: MUST BE STREET ADDRESS)	Ft. Lauderdale, Florida 33301		
(b) Mailing address of limited liability company:	One East Broward Blvd., Suite 700		
(Note: MAY BE POST OFFICE BOX)	Ft. Lauderdale, Florida 33301		
9/16/2009	M09000003663		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:		
Registered Agent:	CORPORATE CREATIONS NETWORK, INC.		
Registered Office Address:	11380 PROSPERITY FARMS ROAD #221E		
	PALM BEACH GARDENS FL 33410 US		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:		
NEW Registered Agent:	C T Corporation System		
NEW Registered Office Address:	1200 South Pine Island Road,		
(MUST BE FLORIDA STREET ADDRESS)	Plantation ,FL33324		
If the limited liability company is not organized under the legistered that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member.  Michael J. Levas, Manager.  Printed or typed name of signee.  I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the production of my post and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company.  Mall.  Signature of registered Agent Williams, AVP, C.T. Corporation Systemanic of registered Agent Williams.	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative volumes wise provided in the articles of originization of this capacity. I fifther affect to per and complete performance of my arties, without a registered agent as provided for in the registered office has been notified in writing of this change.		
Division of Corporations, P.O. Box 632 FILING FEE: \$2			
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