## PUUU 399

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Amen



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORAT <b>ION</b> :	Olympus Servicing Company, Inc.	
DOCUMENT NU	MBER:	P1000000294	
The enclosed Artici	es of Amendment and	fee are submitted for filing.	
Please return all con	respondence concernin	g this matter to the following:	
-		Kelli Turco	
		Name of Contact Person	
_	Olym	pus Servicing Company, Inc.	
		Firm/ Company	
_	503 East Jackson Street, Suite 118		
		Address	
_		Tampa, Florida 33602	
		City/ State and Zip Code	
	E-mail address: (to b	lli.turco@gmail.com e used for future annual report notification)	
For further informa	tion con <b>cer</b> ning this ma	tter, please call:	
Name	Kelli Turco	at ( <u>813</u> ) <u>777-8632</u> Area Code & Daytime Telephone Number	
Enclosed is a check	for the following amou	ent made payable to the Florida Department of State:	
<b>✓</b> \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S\$43.75 Filing Fee & S\$2.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)	
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle	

Tallahassee, FL 32301

## **Articles of Amendment**

Olympus Servicing Company, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
P1000000294
(Document Number of Corporation (if known)

(Document Number of Corpora	ation (if known)	
Pursuant to the provisions of section 607.1006, Florida Stat amendment(s) to its Articles of Incorporation:	utes, this Florida Profit Corporation adopts the follo	
A. If amending name, enter the new name of the corporati	on:	
name must be distinguishable and contain the word "conabbreviation "Corp.," "Inc.," or Co.," or the designation "chartered," "professional association and the word "chartered,"	Corp," "Inc," or "Co". A professional corporation	
B. Enter new principal office address, if applicable:	503 E. Jackson Street	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Suite 118	
	Tampa, FL 33602	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  503 E. Jackson Street		
	Suite 118 Tampa, FL 33602	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office as		
Name of New Registered Agent: Jodi Toledo	·	
	son Street, Suite 118 rida street address)	
Ta <b>mpa</b>	, Florida 33602	
(City	(Zip Code)	
New Registered Agent Signature, if changing Registered I hereby accept the appointment as registered as and I am far Signature of New Signature of New York Signature of New Yor	Agent: nilial with and accept the obligations of the position.  When the position of the position of the position of the position.  When the position of the position of the position of the position.	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
Pres	Allyson Broxton	503 E. Jackson Street, Suite 118 Tampa, FL 33602	☐ Add ☑ Remove
Pres	Jodi Tok do	503 E. Jackson Street, Suite 118 Tampa, FL 33602	☑ Add □ Remove
			☐ Add ☐ Remove
	g or adding <u>additional Articles, enter c</u> tional sheets, if necessary). (Be specifi		
provisions	ndment provides for an exchange, reclassion implementing the amendment if napplicable, indicate N/A)		

The date of each amendmen	t(s) adoption: April 12, 2010
Effective date if applicable:	(data of adoption is namined)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) rere sufficient for approval.
The amendment(s) was/we must be separately provide	ere approved by the shareholders through voting groups. The following statement and joir each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	(1) ting group)
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere idopted by the incorporators without shareholder action and shareholder
Dated H	/12/2010
<b>Sig</b> nature (	Jodi Jolalo
sel	ected, by an incorporator – if in the hands of a receiver, trustee, or other court points of fiduciary by that fiduciary)
	Jodi Tdado
	(Typed or printed name of person signing)
	President
	(Title of person signing)