## 1200000052

| (Re                                     | questor's Name)    |             |  |  |
|---|--------------------|-------------|--|--|
| <b>/A.</b>                              |                    |             |  |  |
| (Ad                                     | dress)             |             |  |  |
|   |                    |             |  |  |
| (Ad                                     | dress)             |             |  |  |
| (0:                                     | dCtate /7 in /Dhan | - 40        |  |  |
| (Cit                                    | y/State/Zip/Phon   | e #)        |  |  |
| PICK-UP                                 | WAIT               | MAIL.       |  |  |
|   |                    |             |  |  |
| (Bu                                     | siness Entity Nai  | me)         |  |  |
|   |                    |             |  |  |
| (Do                                     | cument Number)     |             |  |  |
| Certified Copies                        | Cortificato        | s of Status |  |  |
| Ceraned Copies                          | _ Certificate:     | s or Status |  |  |
|   | 500 Offi           |             |  |  |
| Special Instructions to Filing Officer: |                    |             |  |  |
|   |                    |             |  |  |
| 'AUG 03 2012                            |                    |             |  |  |
| L. SELLERS                              |                    |             |  |  |
| L. SELLERS                              |                    |             |  |  |
|   |                    |             |  |  |
|   |                    |             |  |  |

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

12 AUG -1 PH 8: 56

## **COVER LETTER**

TO:

| TO:      | Registration So<br>Division of Con |   |  |  |  |
|----------|------------------------------------|---|--|--|--|
| SUBJE    | ·CT·                               | Dinner  | Clubbing LLC   |  |  |
| SOBJE    |                                    |   | ted Liability Company  | <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>   |  |
| The end  | closed Articles of                 | Amendment and fee(s) are sub  | mitted for filing.   |  |  |
| Please s | return all correspo                | ondence concerning this matter  | to the following:  |  |  |
|          |                                    | Edn   | Edmund Theodore Baxa III  Name of Person   |  |  |
|          |                                    |   |  |  |  |
|          |                                    |   | Firm/Company   |  |  |
|          |                                    | 9   | Address  |  |  |
|          |                                    |   | Raleigh/NC 27607 City/State and Zip Code   |  |  |
|          |                                    | T   | edBaxa@gmail.com   |  |  |
| For fur  | ther information                   | e-man address: (i   |  |  |  |
|          |                                    | und T. Baxa III   | at (_407_)620 2  |  |  |
|          | Name                               | of Person   | Area Code & Daytime Telepl   | ione Number  |  |
| Enclose  | ed is a check for t                | the following amount:   |  |  |  |
| \$25     | .00 Filing Fee                     | \$30.00 Filing Fee & Certificate of Status                            | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)  | ]\$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |  |
|          | Regist<br>Divisi<br>P.O. E         | tration Section<br>on of Corporations<br>30x 6327<br>hassee, FL 32314 | STREET/COURIER AI<br>Registration Section<br>Division of Corporations<br>Clifton Building<br>2661 Executive Center Ci<br>Tallahassee, FL 32301 |  |  |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Dinn  | nerClubbing LLC   |
|---|---|
| (Name of the Limited Liabilit<br>(A Florida   | ty Company as it now appears on our records.)<br>Limited Liability Company) |
| `   |   |
| The Articles of Organization for this Limited Liability (   | Company were filed on 2/13/12 (eff. 2/14/12) and assigned                   |
| Florida document number L12000020552  |   |
|   |   |
| This amendment is submitted to amend the following:   |   |
| A. If amending name, enter the new name of the lin  | nited liability company here:   |
| s   | StorySafe LLC   |
| The new name must be distinguishable and end with the wo "L.L.C."   | ords "Limited Liability Company," the designation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable:   |   |
| (Principal office address MUST BE A STREET ADD  | RESS)   |
|   |   |
|   |   |
| Enter new mailing address, if applicable:   |   |
| (Mailing address MAY BE A POST OFFICE BOX)  |   |
|   |   |
|   |   |
| B. If amending the registered agent and/or regis<br>registered agent and/or the new registered office add | stered office address on our records, enter the name of the new             |
| registered agent and/or the new registered office add   |   |
|   |   |
| Name of New Registered Agent:   |   |
| New Registered Office Address:  | SECON P. M  |
|   | Enter Florida street address &  |
|   | , Florida Dr. 8   |
|   | 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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

| <u>Title</u> | Nama                                      |   |                |
|--------------|---|---|----------------|
|              | Name                                      | Address   | Type of Action |
|              |   |   | Add<br>Remove  |
|              |   |   | Add Remove     |
|              | <u></u>                                   |   | Add<br>Remove  |
|              |   |   | Add<br>Remove  |
|              |   |   | Add<br>Remove  |
|              | ·   |   | Add<br>Remove  |
| D. If amendi | ng any other information, enter change(s) | here: (Attach additional sheets, if necessary.) | _              |
|              |   |   | <del></del>    |
|              |   |   | _              |
| Dated        | July 28, 2012                             | <u>.                                    </u>    |                |
|              | Elin B                                    |   |                |
| _            | Signature of a member or                  | authorized representative of a member           |                |
| _            |   | Theodore Baxa III                               |                |

Page 2 of 2

Filing Fee: \$25.00