

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000061126

**Entity Name:** FAS STORY LLC

**Current Principal Place of Business:**

4775 TRIBUTE TRL  
KISSIMMEE, FL 34746

**Current Mailing Address:**

4775 TRIBUTE TRL  
KISSIMMEE, FL 34746

**FEI Number:** 87-4797815

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MORALES, SANDRA M  
4775 TRIBUTE TRL  
KISSIMMEE, FL 34746 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	MORALES, SANDRA M	Name	AMJU HOLDINGS , LLC
Address	4775 TRIBUTE TRL	Address	4775 TRIBUTE TRL
City-State-Zip:	KISSIMMEE FL 34746	City-State-Zip:	KISSIMMEE FL 34746

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SANDRA M MORALES

MGR

04/25/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date