

U18000192525

Florida Department of State
Division of Corporations
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((H18000327975 3)))



H180003279753ABC9

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

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Fax Number : (323) 962-3289

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
STORY POWERHOUSE LLC

Certificate of Status	0
Certified Copy	1
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2018 NOV 14 PM 3:17

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Corporate Filing Menu

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FAX COVER SHEET

TO	
COMPANY	
FAX NUMBER	18506176383
FROM	Sarah Acevedo
DATE	2018-11-14 13:01:15 PST
RE	((H18000327975 3))) LZ order# 528414170

COVER MESSAGE

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To: Page 3 of 7
Division of Corporations

2018-11-14 13:01:31 PST

LegalZoom.com, Inc. From: Sarah Acevedo
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-13-18 10:44AM

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COVER LETTER**TO: Registration Section
Division of Corporations****SUBJECT: STORY POWERHOUSE LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cheyenne Moseley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N. Brand Blvd., 11th Floor

Address

Glendale, CA 91203

City/State and Zip Code

juliana@orkideafilms.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheyenne Moseley

Name of Person

at (800)

Area Code

773-0888 ext. 9724

Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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Enclosed is a check for 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,
Certificate of Status &
Certified Copy
(additional copy is enclosed)**MAILING ADDRESS:**
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**STREET/COURIER ADDRESS:**
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

11-12-18 10:14AM

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STORY POWERHOUSE LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/13/2018 and assigned
Florida document number L18000192525.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida

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 605, 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 Changing Registered Agent, Signature of New Registered Agent

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>MARIA J TAFUR</u>	<u>701 BRICKELL KEY BLVD. UNIT 512</u>	<input type="checkbox"/> Add
		<u>MIAMI, FL 33131</u>	<input checked="" type="checkbox"/> Remove
<u>AMBR</u>	<u>MARIA J TAFUR</u>	<u>701 BRICKELL KEY BLVD. UNIT 512</u>	<input type="checkbox"/> Add
		<u>MIAMI, FL 33131</u>	<input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>Maria Juliana Tafur</u>	<u>701 BRICKELL KEY BLVD. UNIT 512</u>	<input checked="" type="checkbox"/> Add
		<u>MIAMI, Florida 33131</u>	<input type="checkbox"/> Remove
<u>AMBR</u>	<u>Maria Juliana Tafur</u>	<u>701 BRICKELL KEY BLVD. UNIT 512</u>	<input checked="" type="checkbox"/> Add
		<u>MIAMI, Florida 33131</u>	<input type="checkbox"/> Remove
<u>AMBR</u>	<u>JORGE ARTURO G TUNON ALVAREZ</u>	<u>701 BRICKELL KEY BLVD. UNIT 512</u>	<input type="checkbox"/> Add
		<u>MIAMI, Florida 33131</u>	<input checked="" type="checkbox"/> Remove
<u>AMBR</u>	<u>Jorge A. Garcia Tunon Alvarez</u>	<u>701 BRICKELL KEY BLVD. UNIT 512</u>	<input checked="" type="checkbox"/> Add
		<u>MIAMI, Florida 33131</u>	<input type="checkbox"/> Remove

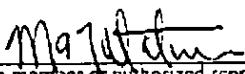
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)Dated November 5, 2018.

Signature of a member or authorized representative of a member

Maria Juliana Tafur

Typed or printed name of signerPage 3 of 3
Filing Fee: \$25.002018 NOV 14 AM 9:18
CLERK
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA