

L21000388200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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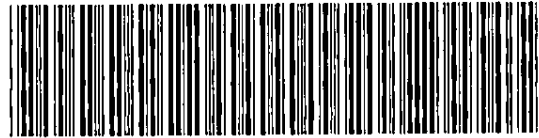
(Business Entity Name)

(Document Number)

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incorporating Services, Ltd.

1540 Glenway Drive  
Tallahassee, FL 32301  
850.656.7956  
Fax: 850.656.7953  
www.incserv.com

incserv

**ORDER FORM**

**TO** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corphelp@dos.myflorida.com  
850-245-6051

**FROM** Melissa Moreau  
  
850.656.7953

**REQUEST DATE** 3/17/2023

**PRIORITY** Regular Approval

**OUR REF # (Order ID#)** 1131105

**ORDER ENTITY**  
HIS STORY DEVELOPMENT LLC

**PLEASE PERFORM THE FOLLOWING SERVICES:**  
**HIS STORY DEVELOPMENT LLC (FL)**

File the attached amended and restated document and provide a certified copy.

**NOTES:**  
\$55.00 Authorized

**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**AMENDED AND RESTATED ARTICLES  
OF ORGANIZATION OF  
HIS STORY DEVELOPMENT LLC**

The undersigned, pursuant to the provisions of Section 605.0202 of the Florida Revised Limited Liability Company Act, being the sole managing member of His Story Development LLC, a Florida limited liability company (the "Company"), hereby amends and restates the Articles of Organization of the Company filed with the Florida Department of State on August 31, 2021, in their entirety to read as follows:

**ARTICLE I - NAME**

The name of the Limited Liability Company is His Story Development LLC.

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Company is 2365 Sailfish Cove Drive, West Palm Beach, FL 33411.

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

The name of the registered agent of the Company at that address is Bruce Lazarus. The street address of the registered office of the Company is 2365 Sailfish Cove Drive West Palm Beach, Florida, 33411.

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as a registered agent as provided for in Chapter 605, F.S.*

By: /s/ Bruce Lazarus  
Registered Agent's Signature  
Dated: March 16, 2023

**ARTICLE IV - MANAGEMENT**

The Company is to be managed by Evergreen Five LLC, its Authorized Member and the managing member of the Company. The name and address of the Authorized Member, which is authorized to manage and control the Company, is as follows:

Evergreen Five LLC, Authorized Member  
2365 Sailfish Cove Drive, West Palm Beach, FL 33411

**SIGNATURE:**

Evergreen Five LLC, Authorized Member

/s/ Bruce Lazarus

By: Bruce Lazarus, Authorized Representative of Evergreen Five LLC

Dated: March 16, 2023

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