

2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L21000168197

Entity Name: STORY FINANCIAL GROUP, LLC

Current Principal Place of Business:

7901 4TH ST N
STE 300
ST. PETERSBURG , FL 33702

Current Mailing Address:

12613 WEEPING BRANCH CIRCLE
JACKSONVILLE, FL 32218 US

FEI Number: 86-3369109

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBERTS, DAVID
7901 4TH ST N
STE 300
ST. PETERSBURG , FL 33702 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: DAVID ROBERTS

07/09/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	PRESIDENT	Title	MGR
Name	STORY, MELISSA D	Name	CARTER MARTINUS, CHELSEA A
Address	12613 WEEPING BRANCH CIRCLE	Address	12613 WEEPING BRANCH CIRCLE
City-State-Zip:	JACKSONVILLE FL 32218	City-State-Zip:	JACKSONVILLE FL 32218

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: MELISSA D. STORY

PRESIDENT

07/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date