

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000165032

**Entity Name:** A PYRAMIDE, LLC

**Current Principal Place of Business:**

13050 BLAKESLEE DR  
SUITE 2  
PHILADELPHIA, PA 19116

**Current Mailing Address:**

13050 BLAKESLEE DR  
SUITE 2  
PHILADELPHIA, PA 19116 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

INCORP SERVICES, INC.  
3458 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312 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	MANAGER	Title	AUTHORIZED REPRESENTATIVE
Name	KOSTIN, AIA	Name	KOSTIN, NATALYA
Address	13050 BLAKESLEE DR APT #1	Address	13050 BLAKESLEE DR APT #2
City-State-Zip:	PHILADELPHIA PA 19116	City-State-Zip:	PHILADELPHIA PA 19116

*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:** AIA KOSTIN

**MANAGER**

**04/26/2024**

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

\_\_\_\_\_  
Date