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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

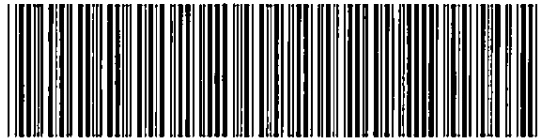
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S. PRATHER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 6, 2024

PYRAMID INVESTMENT MANAGEMENT III, LLC
10656 COUNTRY VIEW DRIVE
SAINT LOUIS, MO 63141

SUBJECT: PYRAMID INVESTMENT MANAGEMENT III, LLC
Ref. Number: W24000020467

We have received your document for PYRAMID INVESTMENT MANAGEMENT III, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Stacy Prather
Regulatory Specialist III

Letter Number: 124A00002630

RECEIVED
FEB 21 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PYRAMID INVESTMENT MANAGEMENT III, LLC.
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAHENDRA GUNAPOOTI
Name of Person

PYRAMID INVESTMENT MANAGEMENT III, LLC
Firm/Company

10656 COUNTRY VIEW DR
Address

ST. LOUIS MO - 63141
City/State and Zip Code

mahipal10304@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAHENDRA GUNAPOOTI at (314) 304 1195
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: PYRAMID INVESTMENT MANAGEMENT III, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

4403 SUN VILLAGE BLVD
KISSIMMEE, FL-34746

6/29/2010

L10000069270

3. _____ 4. _____
Date of filing/registration in Florida Document number

5. (a) GUNAPOOTI, MAHENDRA
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1200 SOUTH PINE ISLAND RD.
Plantation, FL 33324

(b) MAHENDRA GUNAPOOTI
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

4403 SUN VILLAGE BLVD
KISSIMMEE, FL 34746

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member MAHENDRA GUNAPOOTI
Printed or typed name of signee

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.

Signature of Registered Agent