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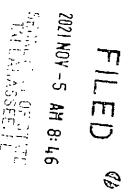
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COVER LETTER

	istration Se ision of Cor					
0.110 111 com	Pyramid Co	onstructions and Equipments L	LC			
SUBJECT:		Name of Lin	nited Liability Company			
The enclosed	d Articles of	Amendment and fee(s) are sub-	omitted for filing.			
Please returi	all correspo	ondence concerning this matter	to the following:			
		Gary Bloome				
			Name of Person			
		Gary Bloome PA				
			Firm/Company	, <u></u>		
		9148 Glades Road				
			Address			
		Boca Raton, FL 33434				
			City/State and Zip Co	de		
		gbloome1@gmail.com				
		E-mail address: (to be used for future anni	ual report notifica	ntion)	
For further is	nformation c	oncerning this matter, please c	ail:			
Gary Bloom	e		561	477-8099		
	Name o	f Person	Area Code	Daytime T	elephone Number	
Enclosed is a	check for th	ne following amount:				
■ \$25.00 H	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ S55.00 Filing For Certified Copy (additional copy is		☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	iling Addres			Address:	on	
Registration Section Division of Corporations			Registration Section Division of Corporations			
). Box 632		The C	Centre of Tall	lahassee	
1 21	lahassee, I	TL 32314	2415	in. Monroe S	Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pyramid Constructions and Equipo					
(Name of the Lim	ited Liability Compa (A Florida Limited)	iny as it now appears on our r Liability Company)	records.)	·····	
The Articles of Organization for this Limited I Florida document number L21000394400	iability Company	were filed on September 3	3, 2021	_ and assigned	i
This amendment is submitted to amend the fol	ending name, enter the new name of the limited liability company here: ame must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." we principal offices address, if applicable: al office address MUST BE A STREET ADDRESS) we mailing address, if applicable: address MAY BE A POST OFFICE BOX) Boca Raton, FL 33434 Boca Raton, FL 33434 The strength of the registered agent and/or registered office address on our records, enter the name of the new registered dor the new registered office address here: Name of New Registered Agent:				
A. If amending name, enter the new name	of the limited liab	ility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbr	viation "L.L.C."	 -
Enter new principal offices address, if appli	303 Preston H				
(Principal office address MUST BE A STRE	ET ADDRESS)	Boca Raton, FL 33434			_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	· BOX)			2021 NO	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) Boca Raton, FL 33434 Boca Raton, FL 33434	istered S				
Name of New Registered Agent:				. o	2
New Registered Office Address:	303 Preston H	F Fl . 1			<u>-</u>
		Enter Florida street a	ddress		
	Boca Raton		_, Florida33434		
		City	*	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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	Fernando L Baloco	234 NE 9th Avenue	≅ Add
		Deerfield Beach, FL 33441	□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			Remove
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Effective date, if other than	he date of file					
If an effective date is listed, the date Note: If the date inserted in this document's effective date on the	must be specific an s block does not	id cannot be prior	to date of filing or r able statutory fifi	nore than 90 days aft ng requirements, th	tional) er filing.) Pursuant to (iis date will not be l	505.0207 isted as
e record specifies a delayed effer rd is filed.	tive date, but no	et an effective ti	ne, at 12:01 a.m.	on the earlier of: ((b) The 90th day a	fter the
		2021				
Dated November 1,						
Dated	2 Gazcia		_			
Dated November 1.	2 Gazcina Signature of a	member or autho	rized representative	of a member		

Filing Fee: \$25.00