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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: Pyramid Eightering Group Inc.
DOCUMENT NUMBER: POSO00032930 DOCUMENT NUMBER: <u>P0500003</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

FOUAD FAIDY Name of Contact Person	
Pyramid Engineering Group t	nc
2550 N John Jourg Pkuy	
KISSIMMEL, FI 34741	
City/ State and Zip Code	
SAMFAID Y@ HOTTIALL : COM  E-mail address: (to be used for future annual report notification	<u>n)</u>

For further information concerning this matter, please call:

TO: Amendment Section

Fouad Faidy at ( 407 ) 920, 4407 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee □\$43.75 Filling Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certified Copy

Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed)

## Mailing Address

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

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



## Articles of Amendment to Articles of Incorporation of

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PYRAMID EN	GINEERING GROUP INC	
		<u>State</u> )
	0500032930 nent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopte	s the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	o," "Inc," or "Co". A professional corporation	ed" or the abbreviation i name must contain the
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		
	<del></del>	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>)X</u> )	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		<u>f the</u>
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	. Fle	prida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg		
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of	the position.
· Sian	sature of New Registered Agent if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	<u>PT</u>	John Doc	
X Remove	$\underline{V}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Oliveira, Daniel	2550 N John Young
Add			Pkwy, Kissimmee,
_XRemove			F1, 34741
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			<del>-</del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>additio</i>	mal sheets, if necessary,	xrticles, enter change(s) here: vi - (Be specífic)	
	<del></del>		
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		<del></del>	
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<del></del>	<del></del>		
<i>r</i>			
provisions fo	r implementing the an	schange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:	
(if not ap <sub>i</sub>	plicable, indicate N/A)		
		<del></del>	· ·
		·	
		<del></del> -	
			<u> </u>
<u> </u>			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 07 17 2019	
Effective date if applicable: 07 17 2019  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	ient(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by'''	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder.	
action was not required.	
Dated 07 17 2019	
Signature PRESIS	EAST
(By a director, president or other officer – if directors or officers have not be selected; by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
FOUGE Fridy	
Touad Faidy (Typed or printed name of person signing)	
President	
(Title of person signing)	