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	nendment Section vision of Corporations		
SUBJECT	PYRITE PIXY 2020, INC.		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Ni	ame of Corporation	
DOCUM	ENT NUMBER: P20000033523		
The enclos	sed Articles of Correction and fed	e are submitted t	for filing.
Please retu	irn all correspondence concerning	g this matter to	the following:
CANDY KA	APLAN		
	Name of Contact Person		_
KRUGERT	TAX, ACCOUNTING & FORENSIC A	SSOC, PLLC	
	Firm/Company		_
7451 WILE	S ROAD - SUITE 204		
	Address	·•	_
CORAL SP	RINGS, FL 33067		
	City/State and Zip Code		_
CANDY@	KTAFA.COM		
•	E-mail address: (to be used for future annual rep	port notification)	_
For furthe	r information concerning this ma	tter, please call:	
CANDY K	· ·	954	772-4000
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An Di P.C	nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314		Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

PYRITE PIXY 2020, INC.	
Name of Corporation as currently filed v	with the Florida Dept. of State
P20000033523	
Document Number (ribaana) P
1Acunca Sumai	(ii x (i) (ii)
Pursuant to the provisions of Section 607.0124, Floric	da Statutes.
	ODDODATION CO
These articles of correction correct ARTICLES OF INC	(Document Type Being Corrected)
	(1) Comment Type Being Confeded)
filed with the Department of State on 05/01/2020	(Document Type Being Corrected) Aute of Document)
Specify the inaccuracy, incorrect statement, or defect:	
LAST NAME OF REGISTERED AGENT AND CORPORA	TE PRESIDENT OMITTED ON ORIGINAL DOCUM
Company of the compan	
Correct the inaccuracy, incorrect statement, or defect:	
NAME SHOULD READ:	
DALIDA NEHME SNIVELY	
	-
and the second s	•••
	A
(Signature of a director, president or other o	flicor - if directors or officers have
not been selected, by an incorporator - if in other court appointed fiduciary, by that tide	the hands of the receiver, trustee, or
, .	
5	DDECUSES
DALIDA NEHME SNIVELY	PRESIDENT (Title of person signing)
(Typed or printed name of person signing)	() Rie of person Signification

Filing Fee: \$35.00