

P200000054208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

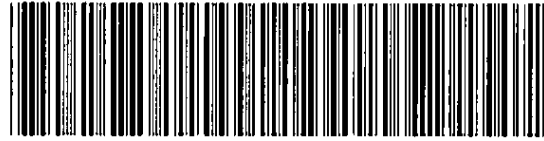
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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*Amended*

10/25/22--01002--020 \*\*35.00

2022 OCT 27 AM 10:58

FILED

SECRETARY  
TALLAHASSEE, FLORIDA

2022 OCT 25 PM 12:15

RECEIVED

A. RAMSEY

OCT 28 2022

X00789 06342 00524 00121

**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP:** DANNY 10/25

**CERTIFIED COPY**

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**CUS**

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INC AMEND

**1. THREE PYRAMIDS GROUP, INC.**

(CORPORATE NAME AND DOCUMENT #)

**2.**  
(CORPORATE NAME AND DOCUMENT #)

**3.**  
(CORPORATE NAME AND DOCUMENT #)

**4.**  
(CORPORATE NAME AND DOCUMENT #)

**5.**  
(CORPORATE NAME AND DOCUMENT #)

**6.**  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: THREE PYRAMIDS GROUP, INC.

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ESSAM KERAS

\_\_\_\_\_  
Name of Person

MK BOOKKEEPING SERVICES, LLC

\_\_\_\_\_  
Firm/Company

6741 LAND O' LAKES BLVD

\_\_\_\_\_  
Address

LAND O' LAKES, FL 34638

\_\_\_\_\_  
City/State and Zip Code

ESSAM@MKBKSERVICES.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ESSAM KERAS

813 368-2872

at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**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 Michoud Road, Suite 200  
Tallahassee, FL 32310



Corrected

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 26, 2022

CORPORATE ACCESS, INC.

TALLAHASSEE, FL 32303

SUBJECT: THREE PYRAMIDS GROUP, INC.  
Ref. Number: P20000054208

We have received your document for THREE PYRAMIDS GROUP, INC. 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 above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed :

AMBR is not an acceptable title for an officer in a corporation. Please use president, vice president, secretary, treasurer or director. Please have Ayman Youssef print his name in the space provided at the bottom of page 3.

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) 245-6823.

Annette Ramsey  
OPS

Letter Number: 222A00024017

RECEIVED  
2022 OCT 27 AM 11:40  
OFFICE OF THE  
CLERK OF THE  
SUPREME COURT  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2022 OCT 27 AM 10: 58

THREE PYRAMIDS GROUP, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P20000054208

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

Signature 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:**

X Change                      PT        John Doe

X Remove                    V        Mike Jones

X Add                        SV       Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>    </u> Change	<u>P</u>	<u>AYMAN YOUSSEF</u>	<u>2909 GULF TO BAY BLVD,L103</u>
<u>    </u> Add			<u>CLEARWATER, FL 33759</u>
<u>X</u> Remove			
2) <u>X</u> Change	<u>P</u>	<u>MOHAMED FERGANY</u>	<u>3850 LANCASTER CT., APT. 104</u>
<u>    </u> Add			<u>PALM HARBOR, FL 34685</u>
<u>    </u> Remove			
3 ) <u>    </u> Change	<u>    </u>	<u>    </u>	<u>    </u>
<u>    </u> Add			<u>    </u>
<u>    </u> Remove			<u>    </u>
4) <u>    </u> Change	<u>    </u>	<u>    </u>	<u>    </u>
<u>    </u> Add			<u>    </u>
<u>    </u> Remove			<u>    </u>
5) <u>    </u> Change	<u>    </u>	<u>    </u>	<u>    </u>
<u>    </u> Add			<u>    </u>
<u>    </u> Remove			<u>    </u>
6) <u>    </u> Change	<u>    </u>	<u>    </u>	<u>    </u>
<u>    </u> Add			<u>    </u>
<u>    </u> Remove			<u>    </u>

**E. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

[illegible]

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

[illegible]

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: 10/21/2022  
(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, this date will not be listed as the document's effective date on the Department of State's records.

**Adoption of Amendment(s) (CHECK ONE)**

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must 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 \_\_\_\_\_."  
(voting group)

☐ 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.

10/21/2022  
Dated \_\_\_\_\_

Signature Ayman Youssef

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

AYMAN YOUSSEF

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)