

L 15000082322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2015 MAY 18 PM 3:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
JUN - 3 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Student Consulting Group, LLC
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:

Scott Klein

Name of Person

Student Consulting Group, LLC

Firm/Company

83 Hammock PL SE

Address

Atlanta, GA 30312

City/State and Zip Code

sklein@studentcg.com

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

For further information concerning this matter, please call:

Scott Klein

404

381-8696

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

(Sunbiz incorrectly states "93" instead of "83")

(Mailing address MAY BE A POST OFFICE BOX)

_____, **Florida** _____
City *Zip Code*

Page 1 of 3

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Derek Kramer	4714 Keene Rd	<input type="checkbox"/> Add
		Plant City, FL 33565	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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CLERK OF DISTRICT COURT
1201 N. ALI
TALLAHASSEE, FL 32301

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

1. AMBR Scott Klein's address should read: 1051 Northrope Dr NE, Atlanta, GA 30324

The "Northrope" street name is misspelled as "Nirthrope" on Sunbiz.

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FALLS CHURCH, VIRGINIA

E. Effective date, if other than the date of filing: May 8, 2015 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated May 8, 2015



Signature of a member or authorized representative of a member

Scott Klein

Typed or printed name of signee