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C. GOLDEN

JAN 2 5 2020

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Financial Education Services, INC. DOCUMENT NUMBER: P09000096477 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Edwin Koziol Name of Contact Person Financial Education Services, INC. Firm/ Company 8956 Tuscan Valley Pl. Address Orlando, FL 32825 City/ State and Zip Code financialedsvc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (877) 460-7337

Area Code & Daytime Telephone Number **Edwin Koziol** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐ \$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to

Financial Education Services, INC.	to Articles of Inco	.*	
		rporation	
	of	•	•
(Name of		21	113 FT: 23 Alt 7:1
	Corporation as currently	filed with the Florida Dept. of Stat	<u>e</u>)
P09000096477			
	(Document Number of	Corporation (if known)	······································
Pursuant to the provisions of section 607.1 as Articles of Incorporation:	006, Florida Statutes, this F	lorida Profit Corporation adopts the	following amendment(s)
. If amending name, enter the new nar	me of the corporation:		
BK Class Inc.	 		The new
name must be distinguishable and contain to the designation "Co-chartered," "professional association," of the designation of t	orp," "Inc," or "Co". A or the abbreviation "P.A."		
3. Enter new principal office address, it Principal office address <u>MUST BE A ST</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
			
If amending the registered agent and new registered agent and/or the new		ss in Florida, enter the name of the	:
Name of New Registered Agent	N/A		
	(Florida stree	t address)	
-	1. 10/141 51/66		
New Registered Office Address:	N/A	, Florida	

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove 3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			
		Page 2 of 4	
		ional Articles, enter change(s) here:	
(Attach additional she N/A	ets, if ne	cessary). (Be specific)	

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provisions for implementing the amendm (if not applicable, indicate N/A) M/A	e, reclassification, or cancellation of issued shares, nent if not contained in the amendment itself:	
		· · · · · · · · · · · · · · · · · · ·
		·- ·- · · · · · · · · · · · · · · · · ·
		
	Page 3 of 4	
	ECEMBER 9, 2019	
The date of each amendment(s) adoption: date this document was signed.	SCHVIDER 9, 2019	, if other than th
Effective date <u>if applicable</u> : N/A		
	(no more than 90 days after amendment file date)	

Note: If the date inserted in this block does not neet the applicable statutory filling 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 ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
•	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	
	(voting group)
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated	Polis M Drie
select	director, president or other officer - if directors or officers have not been ed, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	EDWIN KOZIOL
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)