

PID0000024124

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

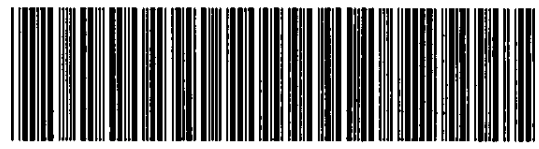
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer: *6/3/16*
Audith Stein
Advised to make
correction on name

Office Use Only



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05/19/16--01022--002 **43.75

FILED
2016 JUN -3 AM 10:26
SFC

CC
Amend/Name
chg

JUN 03 2016
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: EDUCATIONAL CONSULTING GROUP, INC

DOCUMENT NUMBER: P10000024124

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DR JUDITH STEIN

Name of Contact Person

EDUCATIONAL CONSULTING GROUP INC

Firm/ Company

3500 N 46 AVENUE

Address

HOLLYWOOD, FLORIDA 33021

City/ State and Zip Code

jstein9228@aol.com

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

For further information concerning this matter, please call:

DR. JUDITH STEIN

Name of Contact Person

at (954)

558-3884

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 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 20, 2016

DR. JUDITH STEIN
EDUCATIONAL CONSULTING GROUP, INC.
3500 N 46 AVENUE
HOLLYWOOD, FL 33021

SUBJECT: EDUCATIONAL CONSULTING GROUP, INC.
Ref. Number: P10000024124

We have received your document for EDUCATIONAL CONSULTING GROUP, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is M16000001759 - STEIN & ASSOCIATES, LLC.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 116A00010758

Articles of Amendment
to
Articles of Incorporation
of

EDUCATIONAL CONSULTING GROUP, INC

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

P10000024124

(Document Number of Corporation (if known))

FILED
2016 JUN -3 AM 10:26

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:

J. STEIN AND ASSOCIATIES, INC.

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)

3500 N. 46TH AVENUE

HOLLYWOOD, FLORIDA 33021

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3500 N 46TH AVENUE

HOLLYWOOD, FLORIDA 33021

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 DR JUDITH STEIN

3500 N. 46TH AVENUE,

(Florida street address)

New Registered Office Address: HOLLYWOOD

(City)

Florida 33021

(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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|--|----------|--------------------|--------------------------------|
| 1) <input type="checkbox"/> Change | <u>D</u> | <u>NIGEL WHYTE</u> | <u>7001 ENVIRON BLVD, #207</u> |
| <input type="checkbox"/> Add | | | <u>LAUDERHILL, FL 33319</u> |
| <input checked="" type="checkbox"/> Remove | | | |
| 2) <input type="checkbox"/> Change | <u>T</u> | <u>JANE CUTLER</u> | <u>5481 STEEPLECHASE</u> |
| <input checked="" type="checkbox"/> Add | | | <u>BOCA RATON, FL 33496</u> |
| <input type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 4) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 5) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |

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

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

NOT APPLICABLE

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 no; applicable, indicate N/A)

NOT APPLICABLE

The date of each amendment(s) adoption: MAY 15, 2016, if other than the date this document was signed.

Effective date if applicable: MAY 15, 2016
(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.

Dated 05/16/2016

Signature Dr. Judith Stein
(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)

DR. JUDITH STEIN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)