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(Re	questor's Name)	
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March 29, 2019

NATHALIE GRANT 8224 130TH AVE NORTH ROYAL PALM BEACH, FL 33412

SUBJECT: EDUCATION AND CONSULTING SERVICES, INC.

Ref. Number: W19000017601

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

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

You must list at least one incorporator with a complete business street address.

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) 245-6052.

Keyna E Page Regulatory Specialist II

:

Letter Number: 319A00006236



February 22, 2019

NATHALIE GRANT 8224 130TH AVE NORTH ROYAL PALM BEACH, FL 33412

SUBJECT: EDUCATION AND CONSULTING SERVICES, INC

Ref. Number: W19000017601

We have received your document for EDUCATION AND CONSULTING SERVICES, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6052.

Keyna E Page Regulatory Specialist II

www.sunbiz.org

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Letter Number: 119A00003786

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

ITING Service	5,9nc
E NAME – <u>MUST INCLU</u>	J <u>DE SUFFIX</u>)
les of incorporation and	l a check for:
□ \$78.75 Filing Fee & Certified Copy	
ADDITIONAL CO	
(Printed or typed)	
orth	
ddress	
Fl 33412	
tate & Zip	
	Filing Fee & Certified Copy

NOTE: Please provide the original and one copy of the articles.

RNNAT 81 @ TAh 00. Com

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621. F.S. (Profit)

REICLE II - PRIIN	'CIPAL OFFICE		
	Principal street address	Mailing ad	dress, if different is:
224 130 A	beach H. 33412		
loyal Palm E	DEACH H. 33412		
RTICLE III PURI			-
e purpose for which	the corporation is organized is: For Al	1 LAWFUL BUSE	iess
	· · · · · · · · · · · · · · · · · · ·		
<u>.</u>			
	RES of stock is: 100,000	<u></u>	
RTICLE V INIT	IAL OFFICERS AND/OR DIRECTORS	Name and Title:	
RTICLE V INIT	IAL OFFICERS AND/OR DIRECTORS	Name and Title:	
RTICLE V INIT Name and Ti	IAL OFFICERS AND/OR DIRECTORS	Name and Title: Address:	
RTICLE V INIT Name and Ti	of stock is: 100,000	Name and Title:Address:	
Name and Tit Address	MATHORICERS AND/OR DIRECTORS Welle: NATHORICE GRAN Burecho \$224 130 Ave North Royal lain Bench Fl 33iri 2	Address:	
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Name and Tit Address	MATHORICERS AND/OR DIRECTORS Me: NATHORICE GRAN Horrecho \$224 130 Ave North Royal Pain Bench	Address:	19 OC 10 PM
Name and Tit Address	MATHORICERS AND/OR DIRECTORS Welle: NATHORICE GRAN Burecho \$224 130 Ave North Royal lain Bench Fl 33iri 2	Address:	
Name and Tit Address Name and Titl Address	IAL OFFICERS AND/OR DIRECTORS ILLE: NATHOLIE GRAND Brech B224 130 Ave North Royal Palm Beach El 33412 IE: CRAIG GRANT (OFFICER) ROYAL POT AVE North ROYAL PAIN BEACH & 3341	Address:	19 OCT 10 PM 2: 22
Name and Tit Address Name and Titl Address	IAL OFFICERS AND/OR DIRECTORS He: NATHORLIE GRANT COLORCH ROYAL PAIN BEACT 1824 130 Are North FI 33in 2 He: Chaig Grant (Officer) 824 120 Are North Royal Pain Beact & 3341	Address: Name and Title: Address:	19 OCT 10 PM 2: 22
Name and Tit Address Name and Titl Address	IAL OFFICERS AND/OR DIRECTORS ILLE: NATHOLIE GRAND Brech B224 130 Ave North Royal Palm Beach El 33412 IE: CRAIG GRANT (OFFICER) ROYAL POT AVE North ROYAL PAIN BEACH & 3341	Address: Name and Title: Address:	19 OC 10 PM 2: 22

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) o	
Name: MATHALIE GRANT	
Address: 8224 130 Ave North	, LL 00 00 00 00 00 00 00 00 00 00 00 00
Name: NATHALIE GRANT Address: 8224 135 Ave North RYAL PAIN BEACH 79. 33412	19 OCT 10 PM 12: 22
ADTICLE VIII INCORDAD ATAD	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	彩: 22 ^第 "
Name: NATHALIZ GRANT	- -
Address: 8024 Bo Ave North	_
Name: NATHALIE GRANT Address: 8004 Both Ave North Royal PAlm Beach & 334	2
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: 10/1/2019 (If an effective date is listed, the date must be specific and cannot filing.)	. (OPTIONAL) of the more than five days prior or 90 days after the
Note: If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as registered.	for the above stated corporation at the place designated in sistered agent and agree to act in this capacity
	10/1/2019
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein are	
document to the Department of State constitutes a third degree felon	,
1 to	10/1/2019
Required Signature/Incorporator	Date