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(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:				
WH-50544				

Office Use Only



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09/29/11--01014--007 **78.75

SECRETARY OF STATE



COVER LETTER

TO: New Filing Section Division of Corporations					
SUBJECT: Q Consulting, Inc					
	tion - must include suffix				
Dear Sir or Madam:					
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	Standing" and check are submitted to register the				
Please return all correspondence concerning this ma	tter to the following:				
William Quaid					
Name	of Person				
Q Consulting, Inc					
Firm/C	Company				
932 1st Street North, Unit 301					
Ad	ddress				
Jacksonville Beach, FL 32250					
City/Star	te and Zip code				
wquaid@qconsultingservices.com					
E-mail address: (to be us	ed for future annual report notification)				
For further information concerning this matter, please	se call:				
William Quaid at (904) 599-1314					
Name of Person Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclosed is a check for the following amount:					
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Sertified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy				



September 30, 2011

WILLIAM QUAID 932 1ST STREET NORTH, UNIT 301 JACKSONVILLE, FL 32250

SUBJECT: Q CONSULTING, INC Ref. Number: W11000050544

We have received your document for Q CONSULTING, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 411A00022573

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Consuling, inc		¥			
(Enter name of corporation; i	nust include "INCORPORATI	ED,	" "COMPANY," "CORPORATION,"		
"Inc.," "Co.," "Corp," "Inc,"		·			
• • • • •	• •				
**Coastal Designs					
	la enter alternate comorate na	me	adopted for the purpose of transacting busine	es in Flori	(da)
(II hame unavanaole iii i ion	ia, enter alternate corporate na		adopted for the purpose of transacting dusine	33 111 1 1011	iuu)
2. Texas		3	27-0537406		
(State or country under the law	v of which it is incomprated)	٠,	(FEI number, if applicable)		
(State of country under the la-	voi winen it is incorporated)		(i Li hamber, ir applicable)		
4 07/12/2009		5	Perpetual		
(Date of incorpora		٥.	(Duration: Year corp. will cease to exist or	"nemetus	l")
(Date of moorport	wion,		(Duration: Tear corp. will coase to exist of	perpetua	,
6. Have not transacted					
0.	(Date first transacted husines	ss ii	n Florida, if prior to registration)		
(SE			502, F.S., to determine penalty liability)	د ناڅ	*****
·			•		
7, 17611 Bridger Bene	d Lane, Humble Tex	as	s 77346	≽∺	୍ଟ
· · · <u> </u>	(Principal office a			D. C.	
			250		
932 1st Street Nor	th, Unit 301, Jacks	SOI	nville Beach FL 32250	111	
(Current mailing address)					
	` 5		,	200	
5				黑色	လ မ
8. Business Consulting	าg			\approx m	€R0
(Purpose(s) of corporat	ion authorized in home state o	r cc	ountry to be carried out in state of Florida)		
			•		
9. Name and street address of	Florida registered agent: (P.C	D. Box NOT acceptable)		
			<u> </u>		
Name: Greg L	agimoniere				
					
Office Address: 3653 R	egent Blvd, Suite 201				
Jackso	nville		, Florida 32224		
	(City)		(Zip code)		
	(City)		(Zip code)		

10. Registered agent's acceptance:

anaulitaa laa

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:	APPIKA AMARI
A. DIRECTORS	FILED
Chairman:	11007 12
Address:	SECRETA
	AVASSEE, FLORIT
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: William J. Quaid	
Address: 17611 Bridger Bend Lane	
Humble, Texas 77346	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addi	
13.	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 abo	ve) affirms that the facts stated herein
are true and that he or the is aware that false information submitted in a documen	
third degree felony as provided for in s.817.155, F.S. 14. William J. Quaid, President	
(Typed or printed name and capacity of person signing a)	pplication)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Hope Andrade Secretary of State

Office of the Secretary of State

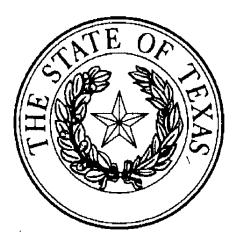
Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Q Consulting, Inc (file number 801145238), a Domestic For-Profit Corporation, was filed in this office on July 12, 2009.

It is further certified that the entity status in Texas is in existence.

Delayed Effective date: July 13, 2009

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereof, the Seal of State at my office in Austin, Texas on October 05, 2011



Hope Andrade Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 391550710003