

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000040856

Entity Name: SHG CONSULTING, LLC

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

1763 N.E. 173RD STREET
N.M.B., FL 33162

New Principal Place of Business:

14800 APRIL DRIVE
LOXAHATCHEE GROVES, FL 33470

Current Mailing Address:

P.O. BOX 601503
N.M.B., FL 331601503

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GUILLUAME, SHEILA H DR
1763 N.E. 173RD STREET
N.M.B., FL 33162 US

Name and Address of New Registered Agent:

GUILLUAME, SHEILA H REV. DR
14800 APRIL DRIVE
LOXAHATCHEE GROVES, FL 33470 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: REV. DR. SHEILA GUILLAUME

04/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GUILLAUME, SHEILA H
Address: P.O. BOX 601503
City-St-Zip: N.M.B., FL 331601503

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GUILLAUME, SHEILA H
Address: 14800 APRIL DRIVE
City-St-Zip: LOXAHATCHEE GROVES, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: REV. DR. SHEILA GUILLAUME

MGRM

04/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date