

LD8000 111662

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

JUL 26 2013
D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Halegen Consulting Group, L.L.C.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Susan Sticker-Hale

Name of Person

Group Q Consulting, L.L.C.

Firm/Company

17025 Traverse Circle

Address

Jupiter FL 33477

City/State and Zip Code

Stickerhale@aol.com

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

For further information concerning this matter, please call:

Susan Sticker-Hale

Name of Person

at (216) 470. 8086

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CLERK OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Halegen Consulting Group, L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/5/2008 and assigned
Florida document number L08000111662

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Group Q Consulting, L.L.C.

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation
"L.L.C."

[GROUP Q CONSULTING, L.L.C.]

Enter new principal offices address, if applicable: Same.

(Principal office address MUST BE A STREET ADDRESS)

17025 Traverse Circle

Jupiter FL 33477

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same as above

B. If amending the registered agent and/or registered office address on our records, enter the name of the new
registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 608, F.S. Or, if this document is
being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability
company has been notified in writing of this change.

N/A

If Changing Registered Agent, Signature of New Registered Agent

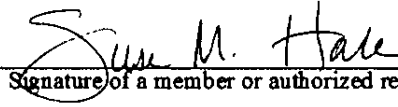
MGR = Manager
MGRM = Managing Member

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ADD
REMOVE
OFFICE OF STATE
CLERK
FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

Dated 7/23/13



Signature of a member or authorized representative of a member

SUSAN M. HALE

Typed or printed name of signee

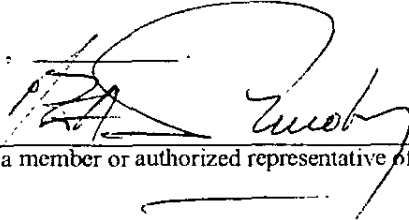
Page 3 of 3

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TALLAHASSEE FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated JULY 10 , 2013



Signature of a member or authorized representative of a member

ZELLI AMEDEO

Typed or printed name of signee

Page 3 of 3

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JUL 25 PM 12:28
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