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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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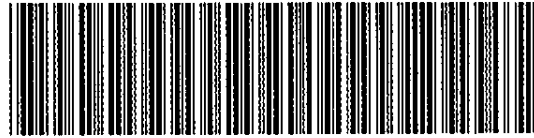
(Business Entity Name)

(Document Number)

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RECEIVED
10 MAY 26 PM 12:20
DIVISION OF CORPORATIONS
TALLahassee, FLORIDA

RECEIVED
10 MAY 26 PM 3:08
DIVISION OF CORPORATIONS
TALLahassee, FLORIDA

B. KOHR

MAY 26 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Inflection Point Consulting, LLC

Name of Limited Liability Company

RECEIVED
DIVISION OF CORPORATIONS
10 MAY 26 PM 3:08

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

Please return all correspondence concerning this matter to the following:

Edward W. Dougherty, III

Name of Person

Firm/Company

538 Claremont Court

Address

Tallahassee, FL 32301

City/State and Zip Code

ewdougherty09@gmail.com

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

For further information concerning this matter, please call:

Edward W. Dougherty, Jr.

Name of Person

at (850) 878-2411

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 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

ARTICLES OF ORGANIZATION

OF

INFLECTION POINT CONSULTING, LLC

RECEIVED
DIVISION OF CORPORATIONS
10 MAY 26 PM 3:08

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purposes of forming a Limited Liability Company under the laws of the State of Florida sets forth the following:

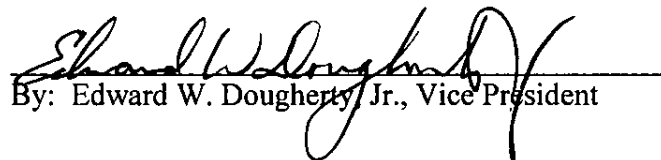
1. Name. The name of the Limited Liability Company is Inflection Point Consulting, LLC (the "LLC").
2. Purpose. The purpose for which the LLC is organized is to provide financial consulting services and to engage in any other lawful activities related or incidental thereto.
3. Address of Place of Business. The mailing and state address of the principal place of business in Florida for the LLC is: 2457 Care Drive, Tallahassee, Florida 32308.
4. Registered Agent. The name and address of the initial registered agent in Florida for the LLC is:

Igler & Dougherty, P.A.
2457 Care Drive
Tallahassee, Florida 32308

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties,

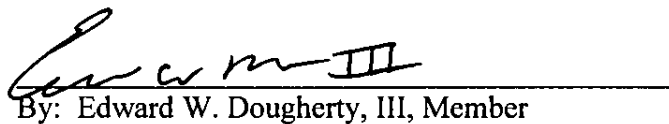
and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

IGLER & DOUGHERTY, P.A., Registered Agent


By: Edward W. Dougherty, Jr., Vice President

Executed at Tallahassee, Florida, on the 25th day of May, 2010.

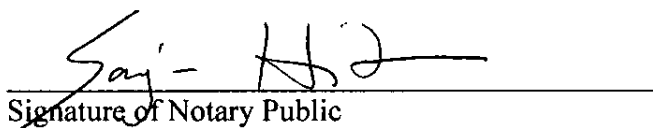
INFLECTION POINT CONSULTING, LLC


By: Edward W. Dougherty, III, Member

STATE OF FLORIDA)
COUNTY OF LEON)

BEFORE ME the undersigned personally appeared **Edward W. Dougherty, Jr.**, Vice President of IGLER & DOUGHERTY, P.A., who is personally known to me and who did take an oath.



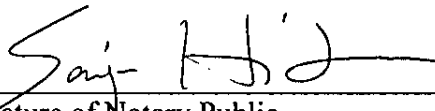

Signature of Notary Public

Notary Stamp/Seal:

STATE OF FLORIDA)
COUNTY OF LEON)

BEFORE ME the undersigned personally appeared and **Edward W. Dougherty, III.**, as
Member of Inflection Point Consulting, LLC, who is personally known to me and who did take
an oath.





Signature of Notary Public

Notary Stamp/Seal: