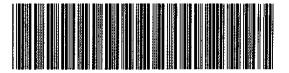
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(Requestor's Name)	_				
(Address)	_				
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(City/State/Zip/Phone #)	_				
PICK-UP WAIT MAIL					
(Business Entity Name)	_				
(Document Number)					
Certified Copies Certificates of Status	_				
Special Instructions to Filing Officer:					

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Effective Date 08/22/13

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SECRETARY OF STATE

JUL 3 0 2013 J. BRYAN

COVER LETTER

•	· , ,					
TO:	Registration : Division of C					
SUBJI		consulting, LLC				
301131	ECT:	Name of Limit	ted Liability Com	pany	,	_
The en	closed Articles o	of Organization and fee(s) are	submitted for filir	ıg.		
Please	return all corresp	pondence concerning this matt	ter to the followin	g:		
	Heather Ca	st Gunter		_		
			Name of Person			
	HCG Consulting, LLC					201
	7866 Round	delay Drive	Firm/Company		ECKE TV	7 1 L
	Address					<u> </u>
	New Port Richey, Florida 34654					PH 3:
	Hgunterfps@		y/State and Zip Coo	ie		4
•		E-mail address: (to be used	for future annual rep	ort notification)		
For fur	ther information	concerning this matter, please	call:			
Heather Gunter Name of Person			727	255-0035		
			_ at (Area Cod	_) le & Daytime Tele	ephone Number	_
Enclos	sed is a check f	or the following amount:				
⊒\$ 125.	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Co		\$160.00 Filing Certificate of S Certified Copy (additional copy is	tatus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton l 2661 Ex	Courier Address tion Section to of Corporations Building tecutive Center (s	

ARTICLE I - Name: The name of the Limited Liability Company is: HCG Consulting, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: 7866 Roundelay Drive New Port Lichar, Fl. 34654 New Port Lichar, Fl. 34654

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Effective Date 08 22/13

Heather Cast Gunter

Name

7866 Roundelay Drive

Florida street address (P.O. Box NOT acceptable)

New Port Richey, Florida 34654

FL

City, State, and Zip

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
mge managing member	Neather Gunter 78 ldo Roundel ay Dr. New Port Richey Ft. 34054
	FILTETAR SEC
	SEEF FLORIDE
(Use attachment if necessary)	9/22/12
ARTICLE V: Effective date, if other than the of (If an effective date is listed, the date must prior to or 90 days after the date of filing.)	date of filing: June 27, 2013 (OPTIONAL) be specific and cannot be more than five business days
REQUIRED SIGNATURE:	4

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Heather Cast Gunter

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)