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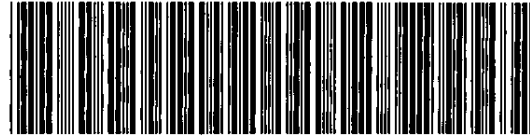
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Advance Career Consulting, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Montique Berisford Shepherd II

Name of Person

Advance Career Consulting, LLC

Firm/Company

3913 E. Jean Street

Address

Tampa, Florida 33610

City/State and Zip Code

advancecareerconsulting@gmail.com

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

For further information concerning this matter, please call:

Montique B. Shepherd II

813

361-4233

at ()

Name of Person

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

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Advance Career 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:

3913 E. Jean Street

Tampa, FL 33610

Mailing Address:

2500 Merchant's Row Blvd

Unit # 35

Tallahassee, FL 32311

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:

Montique B. Shepherd II

Name

3913 E. Jean Street

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

Tampa

FL

33610

City

State

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 605, F.S.

Montique B. Shepherd II
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR/MGR

Name and Address:

Montique B. Shepherd II

2500 Merchant's Row Blvd Unit: 35

Tallahassee, FL 32311

MGR

Monea L. Shepherd

3304 Palm Frond St.

Rosamond, CA 93560

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: September 03, 2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Montique B. Shepherd II

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)

Advance Career Consulting, LLC

Email: Advancecareerconsulting@gmail.com

Principal Office: 3913 E. Jean Street • Tampa, FL • 33610

Mailing Address: 2500 Merchant's Row Blvd • Tallahassee, FL • 32311

Phone: (813) 361-4233

September 03, 2015

To Whom This May Concern:

My name is Montique B. Shepherd II, CEO and Founder of Advance Career Consulting, LLC. This document serves as my official cover letter with my companies direct contact information. For further questions or concerns, I can be reached by telephone at (813) 361-4233 or by email at Advancecareerconsulting@gmail.com.

Sincerely,

Montique B. Shepherd II, MPA
Chief Executive Officer
Advance Career Consulting, LLC