

1.) CORPORATION NAME: <b>OnPoint Consulting, Inc.</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>C T CORPORATION SYSTEM          4701 COX ROAD          SUITE 285            GLEN ALLEN, VA</b>	DUE DATE: <b>7/31/2014</b> SCC ID NO: <b>F1301995</b> 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>20,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	20,000
CLASS	AUTHORIZED				
COMMON	20,000				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>					
4.) STATE OR COUNTRY OF INCORPORATION: <b>DC</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: c/o Sapient Corporation  
131 Dartmouth Street

CITY/ST/ZIP: Boston, MA 02116

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: Teresa Bozzelli TITLE: PRESIDENT ADDRESS: c/o Sapient Corporation 131 Dartmouth Street, Suite 300 Boston, MA 02116 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
---------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------	---------	-------------------------------------	----------

NAME: Joseph S Tibbetts, Jr. TITLE: TREASURER ADDRESS: c/o Sapient Corporation 131 Dartmouth Street, Suite 300 Boston, MA 02116 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
----------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------	---------	-------------------------------------	----------

NAME: Joseph A. LaSala, Jr. TITLE: SECRETARY ADDRESS: c/o Sapient Corporation 131 Dartmouth Street, Suite 300 Boston, MA 02116 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
---------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------	---------	-------------------------------------	----------

NAME: Alan Wexler TITLE: DIRECTOR ADDRESS: c/o Sapient Corporation 131 Dartmouth Street, Suite 300 Boston, MA 02116 CITY/ST/ZIP/CO:	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
----------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------	---------	-------------------------------------	----------

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ Joseph A. LaSala, Jr.	Joseph A. LaSala, Jr., SECRETARY	6/11/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.