J.S. Department of Labor fice of Labor-Management Standards Washington, DC 20210

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved Office of Manageme and Budget No. 1245-0003 Expires 08-31-201



This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440. Required of persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended. (LMRDA)

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

30 DAY					
File Number: C- 65717					
Person Filing					
!. Name and mailing address (inc	clude ZIP Code):	Any other address where records necessary to verify this report are kep			
Name NeKeya Nunn		Name			
Title		Title			
Organization Gideon Group Consulting/The Labor Pros		Organization			
Jiganization ordeon oroup	tonouterny, the nabor 1105	Organization			
² .O. Box, Bldg., Room No., if any		P.O. Box, Bldg., Room No., if any			
3treet 390 North Orange Ave	nue, Ste. 2300	Street			
City Orlando		City			
State Florida	ZIP Code + 4 32801	State ZIP Code + 4			
I. Date fiscal year ends:	5. Type of person:	- 			
Dec / 13	a. Individual b. Partnersh	ip c. ✓ Corporation d. Other (Specify):			
Vature of Agreement or Arrang	gement				
3. Full name and address of empl	oyer with whom made (include ZIP Code):	7. Date entered into: 9 / 1 / 2013			
Name Jason	Rodriguez				
Organization Prestige Consulting Solutions		8. Name of person(s) through whom made:			
⁻rade Name, if any		Name Nekeya Nunn			
o.O. Box, Bldg., Room No., if an	y 249	Name			
Street 509 South Chickas	saw Trail	Name			
City Orlando		Name			
State Florida	ZIP Code + 4 32825	Name			
	Sig	natures			
he information contained in any	s, under penalty of perjury and other applica accompanying documents) has been examin Section VII on penalties in the instructions.)	ble penalties of law, that all of the information submitted in this report (including ned by the signatory and is, to the best of the undersigned's knowledge and bel			
13. Signed	President (If other title, see	14. Signed Treasurer (If other title,			
Title President	instructions)	Title instructions)			
On 03/12/2015	(407) 460-6316	On			
Date	Telephone Number	Date Telephone Number			

			T	
Filer:	NeKeya Nunn	Gideon Group Consulting, Inc.	File Number C-	65717
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- Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:
 - a. To persuade employees to exercise or not to exercise, or persuade employees as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing.
 - b. To supply an employer with information concerning the activities of employees or a labor organization in connection with a labor dispute involving such employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding.
- 10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):
 Gideon Group Consulting will have a consultant(s) at the location being paid on a per hour basis per an oral contract.

Specific Activities to be Performed

- 11. For each activity, separately list in detail the information required (See instructions):
 - a. Nature of activity:

To educate employees concerning their Section 7 rights under the National Labor Relations act to form, join, or assist labor organizations, to bargain collectively or engage in other activities for their mutual aid or protection and the right to refrain from doing so. To enhance the business literacy of the workforce and educate on what itt means if they complete a union authorization card.

11.b. Period during which performed: 9/01/2013	11.c. Extent performed: Additional Name and address through whom performed, if any:		
11.d. Name and address through whom performed:			
Name Nekeya Nunn	Name		
Organization Gideon Group Consulting/The Labor Pros	Organization		
P.O. Box, Bldg., Room No., if any Ste. 2300	P.O. Box, Bldg., Room No., if any		
Street 390 North Orange Avenue	Street		
Dity Orlando	City		
State Florida ZIP Code + 4 32801	State ZIP Code + 4		
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:		
All full-time and part-time employees who may be eligible to join a Union Organization			