

204 0000 19135

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

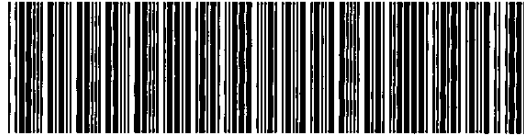
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Advantec HRO, LLC  
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

April Williams  
(Name of Person)

Advantec  
(Firm/Company)

4890 W. Kennedy Blvd Ste 500  
(Address)

Tampa, FL 33609  
(City/State and Zip Code)

For further information concerning this matter, please call:

April Williams at ( 813 ) 207-8619  
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 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 AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

\_\_\_\_\_  
Advantec HRO, LLC  
(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 3/10/04 and assigned document number L04000019135.

**SECOND:** This amendment is submitted to amend the following:

Name and Address

The name of this limited liability company is Advantec ASO, LLC  
and its principal office and mailing address is:

4890 W. Kennedy Blvd. Suite 500

Tampa, FL 33609

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Dated August, 2006.

Advantec ASO, LLC

By: Agency Solutions International, Inc.  
Its: Managing Member

\_\_\_\_\_  
Signature of a member or authorized representative of a member

By: Marian Hyatt Spar

\_\_\_\_\_  
Typed or printed name of signee

Its: Secretary

**Filing Fee: \$25.00**