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(Re	equestor's Name)	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JAN 2 7 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Advantec Risk Manage Name of Limited	ement Consulting Services. UC Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this ma	atter 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			
awilliams@advantec-hr.com E-mail address: (to be used for future annual report notification	n)		
For further information concerning this matter, plea	se call:		
April Williams at (813) 207-8619		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check for the following amount	unt:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

January 25, 2010



Via Federal Express

Registration Section Florida Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Change of Registered Agent

Dear Sir or Madam:

Enclosed please find the cover letter and Statement of Change of Registered Agent to be filed for the following entities together with our company check in the amount of \$520 representing payment of the filing fees at noted:

- 1. Agency Management, L.L.C. \$25
- 2. Agency Solutions of Georgia, L.L.C. \$25
- 3. AdvanTech Solutions Insurance, L.L.C. \$25
- AdvanTech Solutions Payroll Services, L.L.C. - \$25
- 5. HR Agency, L.L.C. \$25
- 6. Advantec ASO, LLC \$25
- 7. Advantec Risk Management Consulting Services, LLC \$25
- 8. AdvanTech Solutions I, L.L.C. \$25
- 9. AdvanTech Solutions II, L.L.C. \$25

- 10. AdvanTech Solutions III, LLC \$25
- 11. AdvanTech Solutions IV, LLC \$25
- 12. AdvanTech Solutions VI, LLC \$25
- 13. AdvanTech Solutions VII, LLC \$25
- 14. TalTech Resources, L.L.C. \$25
- 15. Advantec 9, LLC \$25
- 16. Advantec 10, LLC \$25
- 17. Advantec 11, LLC \$25
- 18. Advantec 12, LLC \$25
- 19. ASI V, Ltd. \$35
- 20. Agency Solutions International, Inc. \$35

Should you have any questions or need additional information, please do not hesitate to contact me at (813) 207-8619.

Sincerely,

April M. Williams Licensing Specialist

April M. Williams

Enclosures

P:\Legal\Corporate Governance\Change of FL RA - Robbins to Smolinski - 1-2010\Letter to Div Corp - File Change of RA forms & fee.doc

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Advantee 1	1013 (1111)
2. (a) Principal office address of limited liability company	:
(Note: MUST BE STREET ADDRESS)	
(Note: Mest BE STREET NOOKESS)	
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	
2/25/05	1 7 7 7 7 7 1 1 1 5 T
	<u>LØ5 ØØØØ19487</u> 4. Document number
* *	
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:
Registered Agent:	Kimberley A. Robbins, Esq.
Registered Office Address:	4890 W. Kennedy Blvd., Ste. 500
Č	Tampa, FL 33609
(b) Enter name of NEW Registered Agent and/or NEW	V Registered Office address:
NEW Registered Agent:	Robert A. Smolinski
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	
	.FL
If the limited liability company is not organized under the liability company is not organized under t	aws of the State of Florida, it is hereby
confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identi-	aws of the State of Florida, it is hereby orida street address of the registered office
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

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