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J. BRYAN

SEP 2 0 2012

**EXAMINER** 

# COVER LETTER

TO	D: Registration Section Division of Corporations	
SU	UBJECT: ENGAGE HRO, LLC	•
•	Name of Lin	nited Liability Company
. Th	e enclosed Articles of Organization and fee(s) a	re submitted for filing.
Ple	ease return all correspondence concerning this m	atter to the following:
	MARJORIE SELTZER	·
		Name of Person
	ENGAGE PEO	
		Firm/Company 6
	3001 EXECUTIVE DR., S	SUITE 340 Address
		Address
	ST. PETERSBURG, FL 337	
		City/State and Zip Code
	MSELTZER@ENGAGEPEO.C	
		d for future annual report notification)
For	further information concerning this matter, plea	ise call:
R'	YAN HOLLANDER	at (727 ) 565-2950 X 209
	Name of Person	Area Code & Daytime Telephone Number
En	closed is a check for the following amount:	
<b>\$125</b>	5.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy 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 ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

## **ENGAGE HRO, 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:	Mailing Address:	
3001 EXECUTIVE DR.	3001 EXECUTIVE DR.	
SUITE 340	SUITE 340	
ST. PETERSBURG, FL 33762	ST. PETERSBURG, FL 33762	

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:

MARJORIE SELTZER	
Name	
3001 EXECUTIVE	E DR., STE 340
Florida street ad	dress (P.O. Box NOT acceptable)
ST. PETERSBURG	<sub>FL</sub> 33762
City St	tate and 7 in

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 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member		SEP 19
MGRM	THE S2 HR GROUP, LLC	
	3001 EXECUTIVE DR., STE 340	<u> </u>
	ST. PETERSBURG, FL 33762	
	· · · · · · · · · · · · · · · · · · ·	
<del></del>		
(Use attachment if necessary)		
ETREE COCCAC - days to day and days	1. 660	(OPTEIONIAL)
LE V: Effective date, if other than the		
fective date is listed, the date must be	e specine and cannot be more than I	ive business days
days after the date of filing.)		

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

#### MARJORIE SELTZER

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)