

L13.0000096368

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H13000147518 3)))



H130001475183ABC/

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : GEOFFREY M. WAYNE, P.A.  
Account Number : 076770003401  
Phone : (305) 381-8108  
Fax Number : (305) 381-8109

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: mf@abogadomiami.com

RECEIVED

13 JUL -5 PM 3:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## FLORIDA LIMITED LIABILITY CO.

## SpendCheck+ LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

JUL - 8 2013

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

# FAX

To: Sec of State, LLC Filing From: Alexis I. Marrero  
Fax: Pages:  
Phone: Date: 7.5.2013  
Re: Spendcheck+ CC: Caroline Lewis

☒ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

## SPENDCHECK+ LLC

### Comments:

Per Caroline Lewis' Instructions, Please Note that this was never filed by your office, attached is our confirmation that the Fax was sent over to your office on June 28, 2013.

**\*\*\*\*PLEASE USE THE JUNE 28<sup>th</sup>, 2013 DATE as the date of Formation\*\*\*\***

[Type comments]

Please find the original fax Confirmation on our end.

Should you have any questions/concerns  
Please contact

ALEXIS at  
(305) 381-8108

7.5.2013

# Transmission Report

Date/Time  
Local ID 1  
Local ID 2

06-28-2013  
3053818109

04:08:16 p.m.

Transmit Header Text  
Local Name 1  
Local Name 2

GEOFFREY M WAYNE PA

This document : Confirmed  
(reduced sample and details below)  
Document size : 8.5"x11"

Division of Corporations

<http://efile.sunbiz.org/scripts/efilecovr.exe>

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000147518 3)))



H130001475183

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : GEOFFREY M. WAYNE, P.A.  
Account Number : 876170803401  
Phone : (305) 381-8108  
Fax Number : (305) 381-8109

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: mf@abogadomiami.com

### FLORIDA LIMITED LIABILITY CO. SpeedCheck+ LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu Help

1 of 1

6/28/2013 3:44 PM

Total Pages Scanned : 2

Total Pages Confirmed : 2

No.	Job	Remote Station	Start Time	Duration	Pages	Line	Mode	Job Type	Results
001	054	850-617-6381	04:06:53 p.m. 06-28-2013	00:00:52	2/2	1	EC	HS	CP14400

#### Abbreviations:

HS: Host send  
HR: Host receive  
WS: Waiting send

PL: Polled local  
PR: Polled remote  
MS: Mailbox save

MP: Mailbox print  
CP: Completed  
FA: Fail

TU: Terminated by user  
TS: Terminated by system  
RP: Report

G3: Group 3  
EC: Error Correct

H13000147518 3

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is: **SpendCheck+ LLC**

**ARTICLE II- Address:**

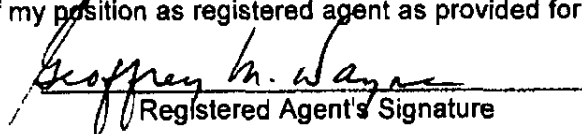
The mailing address and street address of the principal office of the Limited Liability Company is: 1365 Walnut Terrace, Boca Raton, FL 33486.

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature**

The name and the Florida street address of the registered agent are:

Geoffrey M. Wayne, Esq.  
135 San Lorenzo Avenue  
PH 840  
Coral Gables, FL 33146

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

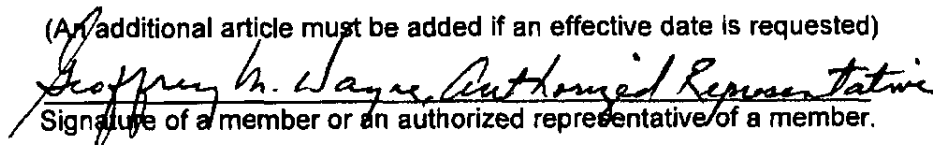
**ARTICLE IV - Management (Check box if applicable.)**

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

**ARTICLE V - That the Member and Officer of the Company is:**

Lourdes Espinoza	-	Member / President / Secretary
Madelaine Espinosa	-	Vice President

(An additional article must be added if an effective date is requested)

  
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.)

Geoffrey M. Wayne  
Typed or printed name of signee

**FILING FEES:**

\$ 100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (OPTIONAL)  
\$ 5.00 Certificate of Status (OPTIONAL)

H13000147518 3