

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000145113

Entity Name: EXPENSELOGIC, LLC

Current Principal Place of Business:

1211 STATE ROAD 436
SUITE 295
CASSELBERRY, FL 32707

Current Mailing Address:

P.O. BOX 4719
WINTER PARK, FL 32792 US

FEI Number: 46-3864584

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WATKINS, SHARON
1211 STATE ROAD 436
SUITE 295
CASSELBERRY, FL 32707 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name WATKINS, SHARON
Address 1211 STATE ROAD 436
SUITE 295
City-State-Zip: CASSELBERRY FL 32707

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHARON WATKINS

CEO

01/17/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date