

F01000003696

CORPORATION SYSTEM

CORPORATION(S) NAME

DB Cash Services, Inc.

100004471571--1
-07/12/01--01045--024
*****70.00 *****70.00

| | | |
|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Other |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Change of RA |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem |
| <input type="checkbox"/> Call Walk In | <input type="checkbox"/> Will Wait | <input type="checkbox"/> After 4:30 |
| <input type="checkbox"/> Mail Out | | <input checked="" type="checkbox"/> Pick Up |

FILED
01 JUL 12 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

7/12/01

BK

MS

Order#: 46492045

Ref#: _____

Amount: \$ _____

TO ACKNOWLEDGE
SUFFICIENCY OF FILING

2001 JUL 12 PM 1:13

RECEIVED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. DB Cash Services, Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Delaware
(State or country under the law of which it is incorporated)
3. 52-2046842
(FEI number, if applicable)
4. 17 July 1997
(Date of incorporation)
5. perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Proposed 1 August 2001
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 4 Albany Street Mail Stop NYC05-0102
New York, NY 10006
(Current mailing address)
8. To provide services in connection with acting as a representative for Bankers Trust Company and affiliated companies.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324
(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

(Registered agent's signature) DENISE MAESTRE, ASSISTANT SECRETARY

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

See attached.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)Chairman: Joseph J. GeranimoAddress: 130 Liberty Street Mail Stop NYC 02-2003
New York, NY 10006

Vice Chairman: _____

Address: _____

Director: Foy B. HesterAddress: 4 Albany Street Mail Stop NYC 05-0102
New York, NY 10006

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)President: Joseph J. GeranimoAddress: (see above)Vice President: Foy B. HesterAddress: (see above)Secretary: Foy B. HesterAddress: (see above)Treasurer: Foy B. HesterAddress: (see above)**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.*See addendum
(attached)*13. Foy B. Hester
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. Foy B. Hester Vice President
(Typed or printed name and capacity of person signing application)

13. Additional Officers (Addendum)

Joseph DiGrazia, Managing Director
130 Liberty Street
Mail Stop NYC02-1104
New York, NY 10006

Sandra West, Assistant Secretary
130 Liberty Street
Mail Stop NYC02-3100
New York, NY 10006

Isi Rigüero, Vice President
2 South Biscayne Boulevard, Suite 1820
Mail Stop MIM02-1820
Miami, Florida 33131

Luz Rios, Vice President
2 South Biscayne Boulevard, Suite 1820
Mail Stop MIM02-1820
Miami, Florida 33131

Patricia Silva, Vice President
2 South Biscayne Boulevard, Suite 1820
Mail Stop MIM02-1820
Miami, Florida 33131

FILED
01 JUL 12 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DB CASH SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF JULY, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

FILED
01 JUL 12 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2774181 8300

010331230

Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1234496

DATE: 07-10-01