F13000003414

(Reques	tor's Name)
(Address	3)
(Address	5)
(City/Sta	te/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busines	ss Entity Name)
(Docum	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	g Officer:
	·
4113-390	82

Office Use Only



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13 AUG -6 PH 4: 44
SECRETARY OF STATE

COVER LETTER

TO: New Filing Section Division of Corp			
SUBJECT: Gome	z Check Cashing	Corp.	
		n - must include suffix	
Dear Sir or Madam:			
"Certificate of Existence	on by Foreign Corporation for," or "Certificate of Good Sta corporation to transact busin	nding" and check are sub	nct Business in Florida," omitted to register the
Please return all correspo	ondence concerning this matte	r to the following:	
Gabriel Gome:	Z.		
	Name of	Person	
Gomez Check	Cashing		
,	• •	npany .	
1369 S. Broad	st		
	Addr	ess	
Trenton, Nj, 08	3610		
	City/State a	and Zip code	
gomez.cc7@gm	_		
	E-mail address: (to be used	for future annual report	notification)
For further information c	oncerning this matter, please	call:	
Gabriel Gomez at (2		, 980-3703	
Name of Person	- "	 Code & Daytime Teleph	one Number
STREET/COUF New Filing Secti Division of Corp Clifton Building 2661 Executive O Tallahassee, FL	orations Center Circle	MAILING A New Filing Se Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7
Enclosed is a check for the	ne following amount:	• • • • • •	. .
□ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy



July 11, 2013

GABRIEL GOMEZ 1369 S. BROAD ST TRENTON, NJ 08610

SUBJECT: GOMEZ CHECK CASHING CORP.

Ref. Number: W13000039082

We have received your document for GOMEZ CHECK CASHING CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 313A00016940

www.sunbiz.org

Ditties (Commenting DO DOV 0007 Mellebores Florida 900)

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.

(If name unavaila	ole in Florida, enter alternate corporate name adop	ted for the purpose of transacting busine	ess in Florida)
New jerse	ey 3.		
(State or country t	nder the law of which it is incorporated)	(FEI number, if applicable)	
02/26/07	5P	erpetual	
(Date	of incorporation) (Du	erpetual uration: Year corp. will cease to exist of	r "perpetual")
08/01/13			
	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502,		
1369 S. B	road st, Trenton NJ 08610		
	(Principal office address)		7AS -1
1369 S. Br	oad st, Trenton Nj 08610		EC P
	(Current mailing address)		HA IS
Check Ca	shing.		SSEE P
(Purpose(s)	of corporation authorized in home state or country	y to be carried out in state of Florida)	등 기
. Name and stree	address of Florida registered agent: (P.O. Bo	ox NOT acceptable)	1000 E
Name:	Gabriel Gómez	_	P (, +
Office Address:	6303 N Power Line Rd Suite 10)	
	Fortlauderdale	, Florida 33309	
	(City)	(Zip code)	

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.

12.	Names a	and business	addresses of	of officers	and/or	directors:

FILED

	to Course Marry Comp
A. DIRECTORS	13 AUG -6 PM 4: 44
Chairman:	SECRETARY OF STATE
Address:	SECRETARY OF STATE TALLAHASSEE FLORIDA
Vice Chairman:	
Address:	
Audicas.	
Director:	
Address:	
Director:	
Address:	
President: Gabriel Gomez Address: 56 Camellia Rd	
Levittown Pa 19057	
Vice President: Carlos Gomez	
Address: 31 Hearth rd	
Levittown Pa 19056	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing add	itional officers and/or directors.
13. Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 12 above are true and that he or she is aware that false information submitted in a documer a third degree felony as provided for in s.817.155, F.S.	
CARRIL CORRECT (PREDDENT)	

(Typed or printed name and capacity of person signing application)

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

13 AUG -6 PM 4: 44
SEGRETARY OF STATE
TALLAHARREE E STATE

GOMEZ CHECK CASHING CORPORATION

0400169044

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on February 26, 2007.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Carlos Gomez 1369 S Broad Street First Floor Trenton, NJ 08610

Certification# 128798377

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 26th day of June, 2013

Andrew P Sidamon-Eristoff State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp