

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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H160001202223ABCQ

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To:

Division of Corporations

Fax Number : (850)617-6383

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

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FOREIGN PROFIT/NONPROFIT CORPORATION

CASH MONEY MERCHANDISING, INC.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

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Help

COVER LETTER

	tration Section					
SUBJECT:	•	Y MERCHAND	ISING, INC.			
Name of corporation - must include suffix						
Dear Sir or M	ladam:					
"Certificate o	f Existence," o		f Good Stan	ding'	' and check are sub	et Business in Florida," mitted to register the
Please return Sal Abecasis	all correspond	ence concerning	g this matter	to th	e following:	
	-1	<u> </u>	Name of I	erso	n	
Allstate Corpo	rate Services Co	огр.				
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1222 Avenue !	M, Suite 301					
Brooklyn, Nev	v York, 11230		Addre	SS		
sal@acs123.co	om		City/State ar	nd Zi	p code	
	F	-mail address:	(to be used f	or fu	ture annual report r	notification)
For further in	formation con	cerning this mat	tter, please o	all:		
Naomi Ostopowitz		800	906-9220			
Nam	e of Person	<u> </u>	Area Code	/ B	Daytime Telep	hone Number
Regis Divis Clifto 2661	EET/COURII stration Section ion of Corpora on Building Executive Cer hassee, FL 32	itions iter Circle			MAILING A Registration S Division of Co P.O. Box 6322 Tallahassee, F	ection orporations 7
Enclosed is a	check for the	following amou	nt:			
□ \$70.00 Fil	ing Fee	\$78.75 Filing Certificate of			3.75 Filing Fee & rtified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

H1600120223

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. CASH MONEY MERCHANDISING, INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transecting business in Florida) 2. (State or country under the law of which it is incorporated) (PBI number, if applicable) JULY 05, 2011 (Date of duration, if other than perpetual) (Date of Incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1755 NE 149TH STREET, MIAMI, FLORIDA, 10106 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) RONALD WILLIAMS Name: 1755 NE 149TH STREET Office Address: IMAIM , Florida 9. 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. (Registered agent's signature)

^{10.} 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.

H/60061202223

11. Names and business addresses of officers and/or directors:

Chairman: 1755 NE 149TH STREET, MIAMI, FLORIDA, 10106 Vice Chairman: Address: Director: Address: Director: Address: B. OFFICERS President: Address: Vice President: Address: Secretary: Address: Treatarer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that the or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 8.817.155, F.S., RONALD WILLIAMS, CEO	A. DIRECT	ONALD WILLIAMS			
Vice Chairman: Address: Director: Address: Director: Address: Director: Address: B. OFFICERS President: Address: Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated heroin are true and that he or she is aware that files information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	179	S NE 140TH STREET MIAMI PLORUDA 10106			
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State of New York Department of State } ss

I hereby certify, that the Certificate of Incorporation of CASH MONEY MERCHANDISING, INC. was filed on 07/05/2011, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

The Biennial Statement is past due.

I further certify that no other documents have been filed by such corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 13th day of May two thousand and sixteen.

Anthony Giardina

Executive Deputy Secretary of State

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