

PROVIDED HAS A STRAIGHT

ACCOUNT NO.

072100000032

REFERENCE

200822

4717814

AUTHORIZATION

COST LIMIT

\$ 70.00

400002042414---5

ORDER DATE : December 24, 1996

ORDER TIME : 11:34 AM

ORDER NO. : 200822-005

CUSTOMER NO:

4717814

CUSTOMER: Ms. Judy Albright Thorn Americas

8200 E. Thorn Drive Wichita, KS 67226

FOREIGN FILINGS

NAME:

THORN CHECK CASHING, INC.

7012/31

XXXX QUALIFICATION

(TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Michael E. Klunk

a farmed but!: Setarate

## 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.	Thorn Check Cashing, Inc.		
1	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPOR abbreviations of like import in language as will clearly indicate that it is a corporation inste or partnership if not so contained in the name at present.	ATION" or v ad of a natu	vords or ral persor
2.	Kansas - 48-119753		
۷.	(State or country under the law of which it is incorporated)  3. 48-119753 (FEI number, if applicable)		<del></del>
4.	November 27, 1996 5. Perpetual		
	(Date of Incorporation)    November 27, 1996   5.   Perpetual	t or "perpet	ual")
6.	Upon Qualification		
1	(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.15	5, F.S./	
7.	8200 E. Thorn Drive	33	S
	Wichita, KS 67226	E	58
		့ မ	357
8.	(Current mailing address)	PH	
o.	All Legal Business (Purpose(s) of corporation authorized in home state or country to be carried out in the		SSE DHH
			ÖH
	Name and street address of Florida registered agent: (P.O. Box or Mail Drop acceptable)  Name: Corporation Services Company		() () () () () () () () () () () () () (
	Name and street address of Florida registered agent: (P.O. Box or Mail Drop acceptable)  Name: Corporation Services Company  Office Address: 1201 Hays St.	Box NOT	OH.
	Name and street address of Florida registered agent: (P.O. Box or Mail Drop acceptable)  Name: Corporation Services Company  Office Address: 1201 Hays St.	Box NOT	OH.
	Name and street address of Florida registered agent: (P.O. Box or Mail Drop acceptable)  Name: Corporation Services Company	Box NOT	OH.
	Name and street address of Florida registered agent: (P.O. Box or Mail Drop acceptable)  Name: Corporation Services Company  Office Address: 1201 Hays St.	Box NOT	OH.
10 Ha cor reg	Name and street address of Florida registered agent: (P.O. Box or Mail Drop acceptable)  Name: Corporation Services Company  Office Address: 1201 Hays St.  Tallahassee , Florida,  Tallahassee , Florida,  Negistered agent's acceptance:  Inving been named as registered agent and to accept service of process for reporation at the place designated in this application, I hereby accept the gistered agent and agree to act in this capacity. I further agree to comply we all statutes relative to the proper and complete performance of my duties, ith and accept the obligations of my position as registered agent.	32301 (Zip Code the above	stated
10 Ha cor reg	Name and street address of Florida registered agent: (P.O. Box or Mail Drop acceptable)  Name: Corporation Services Company  Office Address: 1201 Hays St.  Tallahassee , Florida,  D. Registered agent's acceptance:  Inving been named as registered agent and to accept service of process for reporation at the place designated in this application, I hereby accept the gistered agent and agree to act in this capacity. I further agree to comply we all statutes relative to the proper and complete performance of my duties.	32301 (Zip Code the above	stated

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 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) Address: Vice Chairman: Address: Director: Randy Undarwood 8200 E. Thorn Drive Address: Wichita, KS 67226 Maurice Linnens Director: Address: 8200 E. Thorn Drive Wichita, KS 67226 B. OFFICERS (Street address only- P.O. Box NOT acceptable) Maurice Linnens President: 8200 E. Thorn Drive Address: Wichita KS 67226 Vice President: Don Estep 8200 E. Thorn Drive Address: Wichita, KS 67226 Secretary: Joseph J. Hlavacek 8200 E. Thorn Drive Address: Wichita, KS 67226 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application.) President . 14. \_

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

## STATE OF KANSAS

OFFICE OF SECRETARY OF STATE RON THORNBURGH



## To all to fulion these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the state of Kansas, do hereby certify that I am the custodian of records of the State of Kansas relating to corporations and that I am the proper official to execute this certificate.

SECRETARY OF STATE

I FURTHER CERTIFY THAT

THORN CHECK CASHING, INC.

is a regularly and properly organized corporation under the laws of the state of KANSAS, having been incorporated in Kansas on the 27th day of November, A.D. 1996 and has paid all fees and franchise taxes due this office and is in good standing according to the records now on file in the office of Secretary of State.

In testimony whereof:
I hereto set my hand and cause
to be affixed my official seal.
Done at the City of Topeka, this
27th day of December, A.D. 1996



RON THORNBURGH SECRETARY OF STATE