

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
JIM [unclear]
SECRETARY OF STATE
DIVISION OF CORPORATIONS

FILED

02 OCT 25 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L00000015096

Name and Mailing Address

0002879 01 FP 0.352 **PRSR T9 0 0615 33176-127260

INTERMEX WIRE TRANSFER SERVICES, LLC
11060 NORTH KENDALL DR.
MIAMI FL 33176-1272



2. New Mailing Address City, State, Zip		4. State/Country of Formation FL	
Principal Place of Business 11060 NORTH KENDALL DR. MIAMI FL 33176		5. Date Organized or Qualified To Do Business in Florida 12/01/2000	
3. New Principal Place of Business Address City, State, Zip		6. FEI Number RE-APPLIED FOR	
		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent GARCIA, JORGE L 11060 N. KENDALL DR. MIAMI FL 33176	9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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10. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent Jorge L. Garcia Date 10-22-02

REGISTERED AGENT MUST SIGN

11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	RINCON, JOHN B	11060 NORTH KENDALL DR.	MIAMI FL 33176
500008547325 10/23/02--01065--001 **150.00			
REINSTATEMENT 2002 \$2.50.00 Penalty \$100.00			

12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager John Rincon Date 10/22/02 Daytime Phone # 305-270-6855