AmCash Services, LLC

14421 Newgate Road Voice: (804) 378-9970 Midlothian, VA 23113-4199 Fax: (804) 378-9999

(O)OOOO19747
Tuesday, October 16, 2001

Florida Department of State Division of Corporations Registration Section P. O. Box 6327 Tallahassee, FL 32314

00789-00623-00671

Dear Sir/Madam:

Enclosed is a completed Articles of Organization form along with a check for \$125 to cover the required fees. Please forward a registered Articles of Organization from the State of Florida to the address above. Please do not hesitate to call or write if there are any questions.

Sincerely.

600004645586--5 -10/19/01--01041--004 ****125.00 ****125.00

Stephen F. McCormick

FILED

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SECRETARY OF STATE
TALLAHASSEE



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 22, 2001

STEPHEN F. MCCORMICK AMCASH SERVICES, LLC 14421 NEWGATE ROAD MIDLOTHIAN, VA 23113-4199

SUBJECT: AMCASH SERVICES, LLC

Ref. Number: W01000024416

We have received your document for AMCASH SERVICES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return 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) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 501A00058138

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AmCash Services, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Street Address: 4555 Southern Breeze Drive Mailing Address: 14421 Newgate Rd.

#4927

Naples, FL 34114

23113

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Stephen F. McCormick
Name
4555 Southern Breeze Dr., #4927
Florida street address (P.O. Box NOT acceptable) Naples FL 34114
City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Stephen F. McCormick

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)