FILED Jun 18, 2007 8:00 am Secretary of State 05-14-2007 90363 005 ****50.00

DOCUMENT # L06000010950 1. Entity Name CASHMART, LLC								99	30.00
Principal Plac	e of Busines	s	Mailing Address				30010899		
7290 BIRD ROAD			7290 BIRD ROAD						
MIAMI, FL 33155 US			MIAMI, FL 33155 US						
) 1011 6 30 641 4 11 41 6 711	310 1 411 4 31 7 4111 4111	NI PARI PARI
2. Principal Place of Business - No P.O. Box #			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. W, etc.			04252007	Chg-LLC	CR2E083 (12/08)	
City & State			City & State			4. FEI Numi		2 4	oplied For of Applicable
Zip	Country		Zip Countr		itry		e of Status Desired	S \$5.00 Add Fee Require	ditional
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name				
CORPORATION SERVICE COMPANY					Naire				
1201 HAYS STREET TALLAHASSEE, FL 32301			Stroet Address (ss (P.O. Box Numl	ber is Not Acceptable)			
					City			FL Zip Cod	e
6 The shows	and antit	. submite this statement f	no the purpose of chession in	.aainta.	ad affice as serie		and in the Crate of Floring	FL	
 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 									
SIGNATURE Signature, speed or princial name of registered agent and sids if applicable. (MOTE: Registered Agent applicable required when remaining) DATE									
Filing Fee is \$50.00 Due by May 1, 2007								check payable to repartment of State	9
9.		MANAGING MEMBI	ERS/MANAGERS	10.			ADDITIONS/CI	HANGES	
TITLE	MGR		☐ Delete	TITU				☐ Change	☐ Addition
NAME STREET ADDRESS	GONZALI 7290 BIRI	EZ, ODILYS B D ROAD		NAM SIRE	E ET ADORESS				
CHY-ST-ZP	MIAMI, FL			City-Si					
MLE			fille				☐ Change	Addition	
NAME STREET ADDRESS				NAM					
CITY-ST-ZIP				ET AUDRESS - ST - ZIP					
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STREET ADDRESS CITY-ST-ZIP					ET ADDRESS - ST- ZIP				
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NAME -				NAM	l				
STREET ADDRESS CITY-ST-ZIP					ET ADORESS - ST-ZIP				
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NAME				NAM	ľ				
STREET ADORESS CITY-ST-ZIP	1				ET ADORESS -SI-ZIP				
	corrify that th	A information expolind with	h this liting dose not qualify for			art in Chanter 119	Borida Statutos I fueto	er codity that the inte	·maria.
11. I hereby certify that the information supplied with this fiting does not quelify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or the exemptions are proposed to be supported to the proposed to be supported to the support of th									
SIGNATURE: GALLIN AGNIZOLE, 4-24-07									
SIGNATURE: SIGNATURE AND TYPED OR PRINTED MANIE OF BIORING MEDIBLER, MANAGER, OR AUTHORIZED REPRESENTATIVE DIM DUPLY OF THE PROPERTY OF THE PR									