2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000006384

Entity Name: EZ CASH, LLC

FILED Oct 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

442 SW LAKOTA AVE 3850 SW LACHINE STREET PORT ST LUCIE, FL 34953 PORT ST LUCIE, FL 34953

Current Mailing Address: New Mailing Address:

442 SW LAKOTA AVE 3850 SW LACHINE STREET PORT ST LUCIE, FL 34953 PORT ST LUCIE, FL 34953

FEI Number: 20-8274241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARAN, JASON 442 SW LAKOTA AVE PORT ST LUCIE, FL 34953 US

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.

SIGNATURE: JASON BARAN

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

 Title:
 MGRM () Delete

 Name:
 FRANCHISE SEEKER, INC

 Address:
 442 SW LAKOTA AVE

 City-St-Zip:
 PORT ST LUCIE, FL 34953

Title: MGRM () Delete
Name: BARON, JASON
Address: 442 LAKOTA AVE

City-St-Zip: PORT ST LUCIE, FL 34953

Title: MGRM () Delete
Name: MAYER, ANDREW
Address: 2266 BIMINI DRIVE

City-St-Zip: WEST PALM BEACH, FL 33406

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FRANCHISE SEEKER, INC
Address: 3850 SW LACHINE STREET
City-St-Zip: PORT ST LUCIE, FL 34953

Title: MGRM (X) Change () Addition

Name: BARAN, JASON

Address: 3850 SW LACHINE STREET City-St-Zip: PORT ST LUCIE, FL 34953

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JASON BARAN PRES 10/14/2009