

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000041752

**FILED**  
**Sep 29, 2009**  
**Secretary of State**

**Entity Name:** A & R CHECK CASHING & ADVANCE LLC

**Current Principal Place of Business:**

6208 SW 8TH STREET  
MIAMI, FL 33144

**New Principal Place of Business:**

6884 WEST FLAGLER STREET  
MIAMI, FL 33144

**Current Mailing Address:**

6208 SW 8TH STREET  
MIAMI, FL 33144

**New Mailing Address:**

6884 WEST FLAGLER STREET  
MIAMI, FL 33144

**FEI Number:** 06-1812448      **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:**

PIEPP, ANDREA GARCIA  
6884 WEST FLAGLER STREET  
MIAMI, FL 33144    US

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

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: ANDREA GARCIA PIEPP

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM    ( ) Delete  
Name: PIEPP, ANDREA GARCIA  
Address: 6208 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33144

Title: MGRM    ( ) Delete  
Name: YERO, RUBEN  
Address: 6208 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33144

**ADDITIONS/CHANGES:**

Title: MGRM    (X) Change ( ) Addition  
Name: PIEPP, ANDREA GARCIA  
Address: 6884 WEST FLAGLER STREET  
City-St-Zip: MIAMI, FL 33144

Title: MGRM    (X) Change ( ) Addition  
Name: YERO, RUBEN  
Address: 6884 WEST FLAGLER STREET  
City-St-Zip: MIAMI, FL 33144

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: ANDREA GARCIA PIEPP

OWNE

09/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date