

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L08000024774
FILED 8:00 AM
March 07, 2008
Sec. Of State
mthomas

Article I

The name of the Limited Liability Company is:

MOBILE CHECK CASHING SERVICES OF NORTH FLA LLC

Article II

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

9501 ARLINGTON EXPRESSWAY
JACKSONVILLE, FL. 32225

The mailing address of the Limited Liability Company is:

PO BOX 351627
JACKSONVILLE, FL. 32225

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

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

FREDERICK STORY
14097 CRESTWICK DRIVE EAST
JACKSONVILLE, FL. 32218

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.

Registered Agent Signature: FREDERICK STORY

Article V

The name and address of managing members/managers are:

Title: MGRM
TIERRA STORY
PO BOX 351627
JACKSONVILLE, FL. 32225

Title: MGRM
MARVIN D REDD JR
PO BOX 351627
JACKSONVILLE, FL. 32225

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Article VI

The effective date for this Limited Liability Company shall be:

03/07/2008

Signature of member or an authorized representative of a member

Signature: FREDERICK STORY