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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	





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O7 JUN 21 PH 3: 48

SECRETARY: OF STATE
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DEPART STATE OR STATE
VISION OF CORPORATION
TALL ANALYSES FI ORIDA

RECEIVED



ACCOUNT NO. : 072100000032
REFERENCE : 961018 4320855
AUTHORIZATION: Spullelena 200
COST LIMIT : \$ 155.00
ORDER DATE : June 21, 2007 ORDER TIME : 1:01 PM
ORDER 11ME : 1.01 FM ORDER NO. : 961018-005
ORDER NO. : 961018-005
CUSTOMER NO: 4320855
FOREIGN FILINGS
NAME: BUCKEYE COMMERCIAL CHECK CASHING OF FLORIDA, LLC
XXXX QUALIFICATION (TYPE: LL)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Kathy Drake EXT# 2959

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

TOTAL BUS	SINESS IN FLUKIDA
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUA LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	TES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
1. Buckeye Commercial Check Cashing of 1	
(Name of Foreign Limited	Liability Company)
2. Delaware	Liability Company) 3. 26-0270715 (FEI number, If applicable)
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. May 31, 2007 (Date of Organization)	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. upon filing	
(Date first transacted business in Fl (See sections 608.501 & 608.502 F.S	orida, if prior to registration.) i. to determine penalty liability)
7. 7001 Post Road, Suite 200	
Dublin, Ohio 43016	
	of Principal Office)
8. If limited liability company is a manager-managed	i company, check here
9. The name and usual business addresses of the mar	naging members or managers are as follows:
James H. Frauenberg - 7001 Post Road, S	uite 200, Dublin, Ohio 43016
Chad M. Streff - 7001 Post Road, Suite 20	00, Dublin, Ohio 43016
William E. Saunders, Jr 7001 Post Road	I, Suite 200, Dublin, Ohio 43016
10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photocoparauslation of the certificate under oath of the translator reast be sub-	days old, duly authenticated by the official having custody of records in py is not acceptable. If the certificate is in a foreign language, a mitted.)
11. Nature of business or purposes to be conducted of	or promoted in Florida: Commercial
check cashing service	
dr	_
Signature of a member or an au	uthorized representative of a member.
(in sectordance with section 608,408(3), is an affirmation under the penalties of per	P.S., the execution of this document constitutes
	aunders
	d name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Buckeye Comm	ercial Check Cash	ing of Florida, LLC	
2. The name and th	e Florida street addre	ess of the registered agent and office are:	
C	orporation Service	: Company	
		(Name)	
12	201 Hays Street		
***************************************	Florida Street	Address (P.O. Box <u>NOT</u> ACCEPTABLE)	
Ta	llahassee	FL 32301	
		City/State/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, Florida Statutes.

Corporation Service Company

By: () () ()

(Signature)

Karen M. Dyer, Asst. Sec.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BUCKEYE COMMERCIAL CHECK CASHING OF FLORIDA, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTY-FIRST DAY OF MAY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BUCKEYE COMMERCIAL CHECK CASHING OF FLORIDA, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MAY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4362020 8300

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5719323

DATE: 05-31-07

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