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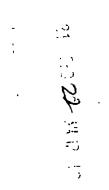
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#### COVER LETTER

TO: Registration Secondinial Division of Corp			:	
SUBJECT: Quick	Cash Listing, L	LC		
	Name o	f Limited Liability Compa	my	
	by Foreign Limited Liability Con abmitted to register the above refe			
Please return all correspon	dence concerning this matter to th	e following:		
Lau	ren Thornton			
		Name of Person		
And	erson Business	s Advisors		
		Firm/Company		
322	5 McLeod Drive	e, Suite 100		
		Address		
Las	Vegas, Nevada	a 89121		
	·	State and Zip Code		
ra@	andersonadvisc	ors.com ed for future annual repor	a middefinal my	
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<del></del>	Thornton	;it ()	06-4741	
ì	Same of Contact Person	Area Code	Daytime Telephone Number	
MAILING ADD Division of Corpe			EET ADDRESS: sion of Corporations	
Registration Secti			stration Section	
P.O. Box 6327 Tallahassec, FL 3	2314	2661	on Building Executive Center Circle thassee, FL 32301	
Enclosed is a check for the				
□ \$125.00 Filing	Fee \$130.00 Filing Fee & Certificate of Status	S155,00 Filing Fee Certified Copy	& \$160.00 Filing Fee. Co of Status & Certified Cop	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYIOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

Cheyenne, WY 82001  Cheyenne, WY 82001  US  US  V. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Anderson Registered Agents, Inc.  Office Address: 1000 North Washington Boulevard	I.C." or "I.L.C.")		
Wyoming   1			
Dursdacion under the law of which toreign funited full-billy company is organized	metade "Landied Liability Company" "L.I. C." or "LI C.")		
1718 Capitol Ave   6.   1718 Cap   Cheyenne, WY 82001   Cheyenne   WS   WS   WS   WS   WS   WS   WS   W			
1718 Capitol Ave  Cheyenne, WY 82001  US  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Anderson Registered Agents, Inc.  Office Address: 1000 North Washington Boulevard  Sarasota  Editor of Process for the above signated in this application. I hereby accept the appointment as registered agent and complete perford accept the obligations of my position as registered agent.  Cheyenne US  Name: Anderson Registered service of process for the above signated in this application. I hereby accept the appointment as registered agent and complete perford accept the obligations of my position as registered agent.  Cheyense US  Florida Capacity: Name and Address: Title or Capacity to Title or Capacity: Name and Address: Title or Capacity to Title or Capacity: Name and Address: Title or Capacity to Title or Capacity: Name and Address: Title or Capacity to Title or Capacity: Name and Address: Title or Capacity to Title or Capacity: Name and Address: Title or Capacity: Organizer Lauren Thornton  1275 Macket Drow Sour: 100  Lav Vingon Towarda 80172:  AMBR QCO Vault, LLC  1/18 Capatal Ave  Cheyenne Vivorency \$2001  Attached is a certificate of existence, no more than 90 days old, duly authenticated be risidiction under the law of which it is organized. (If the certificate is in a foreign langer)	(FEI number, if applicable)		
1718 Capitol Ave    Cheyenne			
Cheyenne, WY 82001  Cheyenne, WY 82001  Cheyenne, WY 82001  Cheyenne, US  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Anderson Registered Agents, Inc.  Office Address: 1000 North Washington Boulevard  Sarasota  Sarasota  Florida registered Agents, Inc.  Office Address: 1000 North Washington Boulevard  Sarasota  Florida registered agent and to accept service of process for the above signated in this application. I hereby accept the appointment as registered agent as comply with the provisions of all statutes relative to the proper and complete perform accept the obligations of my position as registered agent.  (Registered agent's signature)  Title or Capacity: Name and Address: Title or Capacity in Address: Title or Capacity in Lauren Thornton  1275 Mat and Dive State 100  Las Virgas Timodal 89122  AMBR  QCO Vault, LLC  1718 Capacit Aye.  Cheymers Virganing 2001  Attached is a certificate of existence, no more than 90 days old, duly authenticated be risdiction under the law of which it is organized. (If the certificate is in a foreign langed in the certificate is in a foreign langed agent and acceptance.			
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Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Anderson Registered Agents, Inc.  Office Address: 1000 North Washington Boulevard  Sarasota 1000 North Washington Boulevard  Sarasota 1000 North Washington Boulevard  Sarasota 1000 North Washington Boulevard  Equipment agent's acceptance:  aving been named as registered agent and to accept service of process for the above signated in this application. I hereby accept the appointment as registered agent as comply with the provisions of all statutes relative to the proper and complete perford accept the obligations of my position as registered agent.  (Registered agent's signature)  Title or Capacity: Name and Address: Title or Capacity and address of the person(s) who has/have authority to a Title or Capacity: Name and Address: Title or Capacity and address of the person(s) who has/have authority to a Title or Capacity: Name and Address: Title or Capacity and address of the person(s) who has/have authority to a Title or Capacity: Name and Address: Title or Capacity and address of the person(s) who has/have authority to a Title or Capacity: Name and Address: Title or Capacity: Organizer Lauren Thornton  [275 Matasof Diversion 100]  [276 Capacity Agent Diversion 100]  [277 Matasof Diversion 100]  [278 Capacity Agent Diversion 100]  [279 Matasof Diversion 100]  [270 Vault, LLC]  [2718 Capacity Agent Diversion 100]  [2718 Capacity Agent Diversion 100]  [2719 Capacity Agent Diversion 100]  [272 Matasof Diversion 100]  [273 Matasof Diversion 100]  [274 Matasof Diversion 100]  [275 Matasof Diversion 100]  [275 Matasof Diversion 100]  [276 Matasof Diversion 100]  [277 Matasof Diversion 100]  [278 Matasof Diversion 100]  [278 Matasof Diversion 100]  [279 Matasof Diversion 100]  [270 Matasof Diversion 100]  [271 Matasof Diversion 100]  [271 Matasof Diversion 100]  [272 Matasof Diversion 100]  [273 Matasof Diversion 100]  [274 Matasof Diversion 100]  [275 Matasof Diversion 100]  [275 Matasof Diversion 100]  [275 Matasof Diversion 100]  [2	(Mailing Address)		
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Anderson Registered Agents, Inc.  Office Address: 1000 North Washington Boulevard  Sarasota 1001  Egistered agent's acceptance:  aving been named as registered agent and to accept service of process for the above signated in this application. I hereby accept the appointment as registered agent accomply with the provisions of all statutes relative to the proper and complete perford accept the obligations of my position as registered agent.  (Registered agent's squasture)  Title or Capacity: Name and Address: Title or Capacity and address of the person(s) who has/have authority to 1  Title or Capacity: Name and Address: Title or Capacity and address of the person(s) who has/have authority to 1  Laurent Thornton  1228 MAL and Drive South 100  Las Vingus Timoda 8912:  AMBR OCO Vault, LLC  1718 Capacit Age  Cheymers Vinguing A2001  Ose attachments if necessary)  Attached is a certificate of existence, no more than 90 days old, duly authenticated by risdiction under the law of which it is organized. (If the certificate is in a foreign lang	WY 82001		
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Office Address: 1000 North Washington Boulevard  SarasotaFlor  (City)  egistered agent's acceptance:  aving been named as registered agent and to accept service of process for the above esignated in this application. I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the proper and complete perford accept the obligations of my position as registered agent.  (Registered agent's squattine)  The name, title or capacity and address of the person(s) who has/have authority to 1  Title or Capacity: Name and Address: Title or Capacity  Organizer Lauren Thornton  1225 McLevel Drive South 100  Les Vergas Ternada 8912:  AMBR QCO Vault, LLC  1718 Capacit Aver Cherymetre Voyanning #2001  Use attachments if necessary)  Attached is a certificate of existence, no more than 90 days old, duly authenticated be risdiction under the law of which it is organized. (If the certificate is in a foreign lang			
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Signature of an authorized person			
0. This document is executed in accordance with section 605.0203 (1) (b), Florida Sta	utao I am numa that and the information		

Typed or pointed name of signee

Lauren Thornton

## STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

### Quick Cash Listing, LLC

is a

## **Limited Liability Company**

formed or qualified under the laws of Wyoming did on **November 11, 2020**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2020-000957771**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 30th day of December, 2020 at 2:22 PM. This certificate is assigned ID Number 041200518.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website https://wyobiz.wyo.gov and following the instructions displayed under Validate Certificate.