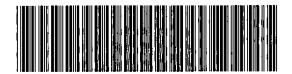
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(Requestor's Name)					
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SECRETARY OF STATE

ALLAWASSEF FLORIDA

sc 1-8-11 W/1000036310

COVER LETTER

The Cash Advancement Foundation, INC.
(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Enclosed is an original a	and one (1) copy of the Artic	les of Incorporation and	d a check for	:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing F Certifie & Certi	d Copy	
		ADDITIONAL CO	OPY REQU	IRED	
FROM:	14441 Mirah Ad TAMPA City, Si	nted or typed) Alle Visto Ci Idress FL 3362 Iate & Zip	rde 6	11 JUL 28 PM 1: 19 SECRETARY OF STATE TALLAHASSEE, FLORIDA	FILED
		17 - 6099 ephone number	_		
į	Antoine cas	th 42 e yah	700. Com	/	

NOTE: Please provide the original and one copy of the articles.



RECEIVED 11 JUL 28 AM 10: 59

FLORIDA DEPARTMENT OF STATE IN 1310N OF CORPORATIONS

July 8, 2011

ANTOINE CASH 14441 MIRABELLE VISTA CIRCLE TAMPA, FL 33626

SUBJECT: THE CASH ADVANCEMENT FOUNDATION, INC.

Ref. Number: W11000036310

We have received your document for THE CASH ADVANCEMENT FOUNDATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6924.

Sharon Collins
Regulatory Specialist II
New Filing Section

Letter Number: 211A00016338

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

Principal street address Mailing address, if different is: 1940 McDelle Ush Circle TAMPA FL 33626	The name of the cor	NAME poration shall be: The Cash Advance	ement Founda	hon, INC
The purpose for which the corporation is organized is: To be a non-profit organization Supporting Kills and advance furthering their education in the community ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Elected ax appointed by the numbers of arganization in a community of arganization in the community of arganization of the community of arganization in the community of arganization of arganization are community of a communi	ARTICLE II	Principal street address 14441 Mirabelle Visto Civile		Mailing address, if different is:
Name and Title: Anthone (ash Prisident Name and Title: Jemes Pinh) - Vice President Name and Title: Address: 14441	The purpose for wh	ich the corporation is organized is: 7. La	a non-profi heir educati	't organization on in the community.
Name and Title: Name and Title: Name and Title: Name and Title: Name and Title: Name and Title: Name and Title: Name and Title: Name and Title: Name and Title: Name: N	Elected	initial officers and/or director initial officers and/or director ic: Antone Cash President 14441 Mirabile Visto Crube	to eyeding	eganization in a
Address: Address: Address: RTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name:				5.00.
RETICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Antoine Cosh RETICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Addr				SECRET JUL
he name and address of the Incorporator is: Name: Andress: Address: 1444 Mirabile Vish Circle TAMPA FL 33626 Laving been named as registered agent to accept service of process for the above stated corporation at the place designated in the ertificate, I am familiar bith and acceptible appointment as registered agent and agree to act in this capacity Required Signature of Registered Agent Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a docume of the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	he <u>name and Flor</u> Name:	ida street address (P.O. Box NOT acceptable) of to 1944 My ability Vista (Pele Tampa Fl 33626	he registered agent is:	
Required Signature of Registered Agent Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a docume the Department of State constitutes a third degree fellony as provided for in s.817.155, F.S.	he <u>name and addr</u> Name:	ress of the Incorporator is: Antoine Cash 14441 Mirabelle Vist Circle	le	
submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a docume the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.				t in this capacity
the Department of State constitutes a Wird degree felony as provided for in s.817.155, F.S.		Required Signature of Registered Agent		<u> </u>
6-30-11	submit this docum the Department o	nent and affirm that the facts stated herein are tru of State constitutes a third degree felony as provide	e. I am aware that any d for in s.817.155, F.S.	
		Required Signature of Incorporator		6-30-11