# P0000066692

07/05/00

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS PO BOX 6327 TALLAHASSEE, FL 32314

300003318233--5 -07/10/00--01103--018 \*\*\*\*\*\*\*78.50 \*\*\*\*\*\*78.50

RE: QUICKCASH MORTGAGE SERVICES, CO.

#### GENTLEMEN:

ENCLOSED PLEASE FIND THE ORIGINAL AND ONE COPY OF THE ARTICLES OF INCORPORATION, TOGETHER WITH MY CHECK IN THE AMOUNT OF \$78.75

THIS REPRESENTS THE COST OF THE FILING FEES, CERTIFIED COPY OF ARTICLES AND FE FOR REGISTERED AGENT DESIGNATION FOR THE ABOVE NAMED CORPORATION

VERY TRULY YOURS.

CARL T THOMPSON SR.

QUICKCASH MORTGAGE SERVICES, CORP

PO BOX 5612 FT LAUDERDALE, FLORIDA 33310-5612 954-980-9946



W/1/12

## ARTICLES OF INCORPORATION

of

(name of corporation)  The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt	
the following articles of incorporation for such corporation:	(s)
ARTICLE I - CORPORATE NAME  The name of the corporation is:	集 7 7 E
Quiekensh Mortgage Sinvices, Inc. 5	Mary Live
	and
ARTICLE II - DURATION	)
This corporation shall exist perpetually unless dissolved according to Florida law.	
ARTICLE III - PURPOSE	
The corporation is organized for the purpose of engaging in any activities or business permitted under the laws United States and the State of Florida.	of the
The corporation is authorized to issue shares of common stock, par value \$ per	share.
STREET ADDRESS 2149 NW 6 Street	
3/47 MW & SIRCE	
CITY Ff LAUTEN CITE - FLORIDA ZIP 333/1	-
Mailing address, if different	
STREET ADDRESS	·
Post Office 5612	
CITY OAKIAND PARK FLORIDA ZIP 33366	<del>-</del>
ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT	
The street address of the initial registered office and the name of the initial registered agent at the off	ice is:
NAME CAN TO THOMPSON SK. ADDRESS (1) Lake Emerale DRIVE #205	_
CITY OAKland Maye FLORIDA ZIP 33309	

### ARTICLE VII - INITIAL BOARD OF DIRECTORS

NAME COLL TO Thomason	Sk :	
NAME CAULTI TOWN PSUN ADDRESS III LATE EMEVALL D	Deivir #705	
CITY OAKLAND PANK	STATE Florida	ZIP 33309
NAME		·
ADDRESS		
CITY	STATÉ	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME /		
NAME CALL T. Thompson Se  ADDRESS /// LAKE EMERALE  CITY CARLAND PAUL  NAME	Drive 4705 STATE Florida	<sup>ZIP</sup> 33709
NAME CALL T. Thompson Sie ADDRESS 111 LAKE EMERALC CITY CARCIANO PANIC NAME ADDRESS	Drive #zos- STATE Florida	<sup>ZIP</sup> 33709
	Drive 4zos STATE Florida  STATE	ZIP <i>33709</i> ZIP
ADDRESS		
ADDRESS		

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Wedstered agent registered office

SECRE
LORDE
LORDE

Lorde Associated Montage Sequices me

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at	LAKE	EMERIC	of Deci	VE # 205	
	OAKLAND	PAUL	M.	33309	
	Carl				

located at the aforesaid address, as its registered agent to accept service of process within this state.

Having been named as registered agent and to accept service of process for the above stated corporation 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.

(Signature) 7/5/00 (Date)