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TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY
1. No miami CHECK CASHING INES (Corporation Name) (Corporation Name) (Corporation Name) (Corporation Name)
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NEW FILINGS AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Domestication Other Dissolution/Withdrawal Merger
REGISTRATION/ QUALIFICATION Annual Report Fictitious Mame Name Reservation Reinstatement 7 Trademark Other CR2E031(9/92)

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

N. Miami CHECK CASHING, INC 1717 N.W. 17 AVE Miami, FL 33125

01 SEP 26 PH 1: 07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

1717 N.W. 17 AVE. Miami, FL 33125

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 STOCKS -> \$1.00×

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MIGUEL LUCENA 1717 N.W. 17 AVE MIAMI, FC 33126

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

MIGUEL LUCENA 1717 N.W. 17AVE

MIAMI 1 12 33125

The undersigned incorporator has executed these Articles of Incorporation this Day of September 2001

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

MIGUEL LUCENA ->> PRESIDENT

MIAMI , FL 33125

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFIC

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related 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