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SEC. OF STATE
211 MARKET STREET
ANN ARBOR MI 48106

03 APR 25 AM 9:44

APR 25 2003

Handwritten signature/initials

TRANSMITTAL LETTER

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

SUBJECT: MASTER CHECK CASHING AND EXCHANGE, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00	<input checked="" type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status

ADDITIONAL COPY REQUIRED

FROM: MASTER CHECK CASHING AND EXCHANGE, INC.
Name (Printed or typed)

2212 S. CHICKASAW TRAIL STE 302
Address

ORLANDO, FL 32825
City, State & Zip

Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

MASTER CHECK CASHING AND EXCHANGE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2212 S. CHICKASAW TRAIL STE 302
ORLANDO, FL 32825

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CHECK CASHING AND EXCHANGE

ARTICLE IV SHARES

The number of shares of stock is:

10,000 shares at a par value of \$1.00 ea

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ALVARO ALVAREZ
2212 S. CHICKASAW TRAIL STE 302
ORLANDO, FL 32825

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ALVARO ALVAREZ
2212 S. CHICKASAW TRAIL STE 302
ORLANDO, FL 32825

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALVARO ALVAREZ
2212 S. CHICKASAW TRAIL STE 302
ORLANDO, FL 32825

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

Date

Date

03 APR 25 AM 9:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA