

PO3000057977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

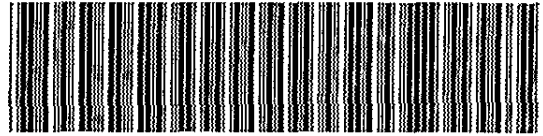
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
03 MAY 19 AM 11:00

CR 5/21

**TRANSMITTAL LETTER**

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

SUBJECT: Cash Money Express, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Tax Defense Center, Inc.  
Name (Printed or typed)

2350 W 84<sup>th</sup> Street  
Address

Nialeah, FL 33016  
City, State & Zip

305-825-2500  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION  
OF  
CASH MONEY XPRESS, INC.**

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
03 MAY 19 AM 11:00

We, the undersigned, all of whom are of legal age, do hereby associate ourselves for the purpose of becoming a corporation under the laws of the State of Florida authorizing the formation of corporations.

**ARTICLE I**

The name of this corporation shall be:

**CASH MONEY XPRESS, INC.**

**ARTICLE II**

The purpose is to engage in any activities of business permitted under the laws of the United States and the State of Florida.

**ARTICLE III**

It shall have authority to issue 100 shares of stock, all of one class, with \$ 1.00 par value.

**ARTICLE IV**

The corporation shall begin with \$ 100.00 capital.

**ARTICLE V**

The period of its duration is perpetual.

**ARTICLE VI**

The address of its principal office is:

2425 w 76<sup>TH</sup> Street #206  
Hialeah, FL 33016

## **ARTICLE V11**

The number of directors constituting its initial Board of Directors is (1) whose name(s) and address(es) is (are):

**Stevens Ortiz  
2425 W 76<sup>th</sup> Street #206  
Hialeah, FL 33016  
President**

## **ARTICLE V111**

The name and address of the subscriber is:

**Stevens Ortiz  
2425 W 76<sup>th</sup> Street #206  
Hialeah, FL 33016**

## **ARTICLE IX**

The registered agent and registered office for the corporation shall be:

**TAX DEFENSE CENTER, INC.  
2350 W 84<sup>th</sup> Street #20  
Hialeah, FL 33016**

## **ARTICLE X**

Shareholders shall be entitled to preemptive rights.

  
**Stevens Ortiz**

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 MAY 19 AM 11:00

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.  
IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT **CASH MONEY XPRESS, INC.** DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF **HIALEAH**, STATE OF FLORIDA HAS NAMED **TAX DEFENSE CENTER, INC.** AS ITS AGENTS TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

Signature: Stevens Ortiz  
**Stevens Ortiz**

Title: **PRESIDENT**

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

Signature: Elysabet Montanez  
**Elysabet Montanez**  
**Tax Defense Center, Inc.**

Date: 5-13-03