P04000165549

(Requestor's Name)				
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(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Consideration to 511 a Company				
Special Instructions to Filing Officer:				





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TRANSMITTAL LETTER

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

SUBJECT: Armand	io's Group, Inc.	ATE NAME - MUSTINGE	IDE SHEEDY
Enclosed are an ong	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Bria	an Socolow		
	Nam	e (Printed or typed)	· · · · · · · · · · · · · · · · · · ·
	14465 NW 22nd Avenue	Address	
		Address	
<u>.</u>	Opa Locka, Florida 33054	, State & Zip	
	·	•	
	786-299-6414		
	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:

Armando's Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 9090 NW South River Drive Medley, Florida 33166

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

To operate as a check cashing company and to provide other services with-in the check cashing industry.

ARTICLE IV SHARES

The number of shares of stock is: 500

INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V

List name(s), address(es) and specific title(s):

President: Brian Socolow 14465 NW 22nd Avenue, Opa Locka, FL 33054 Vice President: Armando Febles 9090 NW South River Drive, Medley, FL 33166 Secretary/Tresurer: Lucy Burgos 9090 NW South River Drive, Medley, FL 33166

REGISTERED AGENT ARTICLE VI

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Brian Socolow 14465 NW 22nd Ave, Opa Locka, FL 33054

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Brian Socolow 14465 NW 22nd Avenue, Opa Locka, FL 33054

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been named as registered agent to accept service of process, tte, I am familiar with and accept the appointment as registere		
	12/07/2004	
Signature/Registered Agent	Date	
	1217/04	
Signature/Incorporator	Date	