P05000038704

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Premier	ASL Advance: C	book Cashing, Inc
DOCUMENT NUMBER: POS 00003	4078	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this r	natter to the following:	
TERRI TOPE	ne of Contact Person	
Premier Cosh De	Avance Checy Ca.	shing, Inc.
2506 W. Hary	Address	
Triverness, -Ho	State and Zip Code	
PCA411 Gmail E-mail address: (to be used to	or future annual report notification)	
For further information concerning this matter, ple	ease call:	
Name of Contact Person	at (352) 200-' Area Code & Daytime Tel	
Enclosed is a check for the following amount made	de payable to the Florida Depart	ment of State:
☐\$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl	e

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Frenier Cosh Advance			
(Name of Corporation as current	ly filed with the Florid	a Dept. of State)	
P05000038704			
(Document Numbe	r of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, lamendment(s) to its Articles of Incorporation:	Florida Statutes, this <i>F</i>	Iorida Profit Corporation	adopts the following
A. If amending name, enter the new name of th	e corporation:		
			The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the de name must contain the word "chartered," "profes	esignation "Corp," "Inc	c," or "Co". A professio	oorated" or the onal corporation
B. Enter new principal office address, if application	able:		
(Principal office address MUST BE A STREET A	ADDRESS)		
			O9 DEC
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)		SS I
	* 4	: Fl:	26 26
D. If amending the registered agent and/or reg new registered agent and/or the new register		in riorida, enter the nam	e of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street d	address)	
		, Florida	
_	(City)	(Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registered age.	nt. I am familiar with a	and accept the obligations	of the position.
Sigr	nature of New Registere	ed Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
D	Daniel L. Pope	P.O.BOV STS DCKlawaha, 71a. 32183	_ ☐ Add ☐ Remove
			_
(attach d	additional sheets, if necessary). (Be spe	cific)	
provis	mendment provides for an exchange, reions for implementing the amendment in the applicable, indicate N/A)		

The date of each amendment(s) adoption: 12-01-09
(date of adoption is required)
Effective date if applicable: 12-02-09
Effective date if applicable: 12-02-09 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
by" (voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 12-09-09
Signature
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(Title of person signing)