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COVER LETTER

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

SUBJECT: QUICK CASH CHECK CASHING, CORP.

(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 \$78.75 Filing Fee & Certificate of Status	\$78.75	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM: LOUIS A. ALEXANDER Name	(Printed or typed)	
12100 S.W. 47 ST	Address	
MIAMI, FL 33175 City,	State & Zip	
305-219-8747 Daytime To	elephone number	
NONE E-mail address: (to be used	l for future annual report	notification)

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	<u>NAME</u>	QUICK CASH CH	ECK CA	ASHING, CO	DRP		
The name of the	corporation shall be:			,, _			
ARTICLE II	PRINCIPAL O	FFICE					
		reet address			Mailing address, i	f different is:	
		D FLOORALL LEGAL BUSINESS					
	HIALEAH, FL.3	3013	•				
			•		•		, i, .,
ARTICLE III							المدافعية في
The purpose for	which the corporati	ion is organized is:				[72] : 4.	4.
		UTHORIZED UND	DER TH	E LAWS OF	THE STATE	OF FEORIDA	, _ع ال , ،
THE UNITE	ED STATES OF	: AMERICA					1 9
						3 5	
						U;	
ARTICLE IV	SHARES					h.	
The number of s		E HUNDRED COMM	ON STO	CKS SHARE	S WITH A PAR	VALUE OF \$1.00	, PER
		ARE.					
ARTICLE V	INITIAL OFFI	CERS AND/OR DIRE	CTORS	NI IMI	101110 4 41		TA DV
Name and Address:	11116: <u>LOUIS A. A</u>	ALEXANDER, PRES	DENI 22475	Name and little	LOUIS A. ALI	ZANDER, SECH	<u>(E</u> JAKY
Address:	12100 5.44.4	47 STREET, MIAMI, FI	_337/3	Address:	12100 S. VV.	<u>47 ST. MIAMI. FI</u>	<u>_ 3</u> 3175
	<u></u>						
					· · · · · · · · · · · · · · · · · · ·		
Name and	Title: LOUIS A. AL	EXANDER VICE PRE	SIDENT	Name and Title	»:		
Address:	12100 SW	47 ST. MIAMI. FL	33175	Address:			
	 						
NI	TWI-LIOLIO A. A	LEVANDED TOTAL	011050	NT 100%1.			
Name and Address:		LEXANDER, TREAS					
Audiess:	TS 100 244	47 ST, MIAMI, FL	331/3	Address:	•		
			-				
L	REGISTEREL						
		ss (P.O. Box NOT accept	table) of th	ne registered age	ent is:		
Name:		ALEXANDER					
Address:		ST 27th STREET					
	HIALEA	I, FL 33013					
ARTICLE VII	INCORPORAT	ror					
	ddress of the Incorp						
Name:		ALEXANDER					
Address:		47th ST, MIAMI, F	L 33175				
			_				
		gent to accept service of					ed in
uns cerujicute, i	. , , ,	nd accept the appointmen	_	-	_	· 1	
	4	us alexa	and of	\		2/18/20	17/
						<u>-/ -/ / / / / - / - / / / / / / / / / /</u>	27
	Required	Signature/Registered Ag	ent			Dafe	
I submit this do	cument and affirm	that the facts stated her	rein are t	ue. I am awar	that the false in	formation submitted	l in a
		constitutes a third degre				je	
	- (//	•	7			2/./	
	IMILA	e alexani	eler			2/19/20	//
	Require	ed Signature/Incorporate	<u>-</u> or	····	_	Date	-
		G					