

P12.000078094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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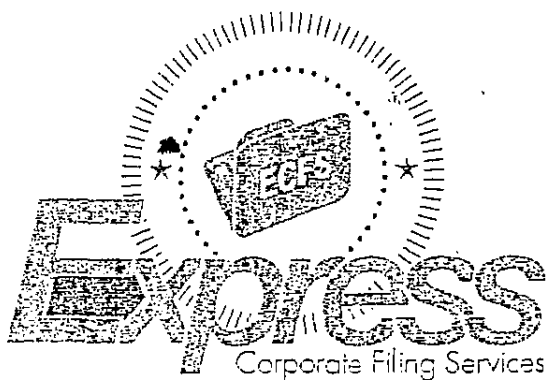


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DIVISION OF CORPORATIONS

9/14/12



1000 Ponce de Leon Blvd. Suite: 101

Coral Gables, FL 33134

Phone: 305 444 4994

Email- filing@ecfsfiling.com

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Sunshine Check Cashing Corp
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in

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NEW FILINGS	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

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Examiner's Initials

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be:

SUNSHINE CHECK CASHING CORP

12 SEP 13 AM 8:11

ARTICLE II PRINCIPAL OFFICE

Principal street address

5700 COLLINS AVE APT. 11-D

MIAMI BEACH FL 33140

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation will engage in the business of Check Cashing and other related business activities.

ARTICLE IV SHARES

The number of shares of stock is: 1,000 Shares each \$1.00 per value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Yixi Quirenia Hernandez-as President Name and Title: _____

Address: 5700 Collins Ave Apt 11-D Address: _____

Miami Beach FL 33140

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Yixi Quirenia Hernandez

Address: 5700 Collins Ave apt 11-D

Miami Beach FL 33140

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Yixi Quirenia Hernandez

Address: 5700 Collins Ave apt 11-D

Miami Beach FL 33140

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

X

Required Signature/Registered Agent

09/11/12

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of _____ constitutes a third degree felony as provided for in s.817.155, F.S.

X

Required Signature/Incorporator

09/11/12

Date