FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

	Check this box if no longer subject
١	to Section 16. Form 4 or Form 5
J	obligations may continue. See
	Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Maydon Laura I					2. Issuer Name <b>and</b> Ticker or Trading Symbol  International Money Express, Inc. [ IMXI ]								Che (Che	5. Relationship of Reporting Person(s) to Issu (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/23/2023							Office	er (give title v)		Other (s	specify			
9480 S. 1	DIXIE HIG	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)									
(Street)													2	X Form filed by One Reporting Person					
MIAMI FL 33156														Form filed by More than One Reporting Person					
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication													
			Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																
		Table	- No	n-Deriva	tive S	ecur	ities Acc	juired, I	Disp	osed of	, or	Ben	eficia	lly Owr	ned				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date,			3. Transaction Code (Instr. 8)  4. Securit Disposed and 5)						5. Amo Securi Benefi Owned Follow	ties cially l ing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A (C	A) or D)	Price		ed .ction(s) 3 and 4)				
Common Stock 06/23/2						2023		A <sup>(1)</sup>		5,919		Α	\$ <mark>0</mark>	24	24,632 <sup>(2)</sup>		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	tive Conversion Date ty or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expiratio	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		d 4)	. Price of Perivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	wnership orm:	Beneficial Ownership ct (Instr. 4)			
					Code	v	(A) (D)	Date Exercisa		Expiration Date	Title	or Nun of	ount nber res						

## Explanation of Responses:

- 1. The reported transaction is an award of restricted stock units, subject to the reporting person's continued services as a director of the issuer. These restricted stock units will vest on June 23, 2024 and be settled in shares of common stock.
- $2. \ The \ amount \ includes \ 12,666 \ shares \ deliverable \ upon \ vesting \ and \ settlement \ of \ restricted \ stock \ units.$

## Remarks:

/s/Santiago Bravo, Attorneyin-Fact for Laura I. Maydon

06/27/2023

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.