FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

1. Name and Address of Reporting Person* COHEN BETSY Z				2. Issuer Name and Ticker or Trading Symbol International Money Express, Inc. [IMXI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title V Other (specify						
		rst) (COMPANY CLE, 24TH FLO	Middle)		07/20	3. Date of Earliest Transaction (Month/Day/Year) 07/26/2018									below) Member 13d group owns over 10%				
(Street) NEW YORK NY 10019			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				son		
(City)	(St		Zip) e I - No	n-Deriv	ative S	Secu	rities	Acc	uired	. Dis	posed o	f. o	r Ben	eficia	ally (
1. Title of Security (Instr. 3)			2. Transac	2. Transaction		2A. Deemed Execution Date,		3. 4. Securit Transaction Code (Instr.		4. Securitie	es Acquired (A) or Of (D) (Instr. 3, 4 and 5			d 5)	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	((A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common	Stock			07/26/2	2018				J ⁽¹⁾		100,000		D	(1)	38	7,689 ⁽²⁾	I	By Cohen Sponsor Interests II, LLC
Common	Stock			07/26/2	2018				S		105,953	3	D	\$0.0	047	28	1,736 ⁽²⁾	I	By Cohen Sponsor Interests II, LLC
Common Stock															89	92,827	D		
Common	Stock															50	00,000	I	By Spouse IRA
Common Stock														200,000(2)		I	By Family Trust		
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) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Execution Date, if any (Month/Day/Year)		ned n Date,	Transaction Code (Instr. II)		of		6. Date Exercis Expiration Date (Month/Day/Ye		sable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		l	8. Pri	ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Date Expiration Exercisable Date		Title	or Nu of	nount mber ares						

- 1. Transferred in connection with the closing of the merger contemplated by the Agreement and Plan of Merger, dated as of December 19, 2017, by and among the Issuer, FinTech II Merger Sub Inc., FinTech II Merger Sub 2 LLC, Intermex Holdings II, Inc. and SPC Intermex Representative LLC for no consideration.
- 2. The reporting person disclaims beneficial ownership of these securities, except to the extent of her pecuniary interest therein, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

07/30/2018 /s/ Betsy Z. Cohen

** 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.