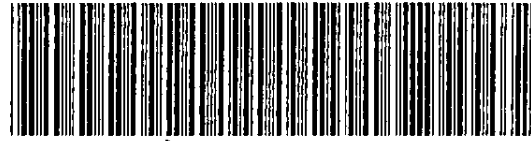


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05/18/11--01003--003 **1400.00

05/02/11--01050--004 **87.50

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special instructions to Filing Officer:

Office Use Only

511-6540-659-647

W11000024624

\$1400.00

5/19/11

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 MAY 16 PM 2:23

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: FARMERS DEPOSIT BANK
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

CARROLL YATES
Name of Person
FARMERS DEPOSIT BANK
Firm/Company
PO BOX 126, 5230 SOUTH MAIN STREET
Address
EMINENCE, KY 40019
City/State and Zip code
diann.harlow@farmersdepositbank.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARROLL YATES at (502) 845-5639
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

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Enclosed is a check for the following amount:

- \$70.00 Filing Fee* \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy



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SECRETARY OF STATE
DIVISION OF CORPORATIONS

MAY 16 PM 2:23

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2011

CARROLL YATES
5230 SOUTH MAIN STREET
EMINENCE, KY 40019

SUBJECT: FARMER'S DEPOSIT BANK INCORPORATED
Ref. Number: W11000024624

We have received your document for FARMER'S DEPOSIT BANK INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1,400.00.

A brief description of the entity's nature of business must be included in the document.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 511A00010753

OFR

FLORIDA
OFFICE OF
FINANCIAL
REGULATION

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STREET ADDRESS: 101 East Gaines Street, Suite 636 • PHONE (850) 410-9800 • FAX (850) 410-9548
MAILING ADDRESS: Division of Financial Institutions, 200 East Gaines Street, Tallahassee, FL 32399-0371
Visit us on the web: WWW.FLOFR.COM • Toll Free: (800) 848-3792

J. THOMAS CARDWELL
COMMISSIONER

April 26, 2011

Mr. Carroll Yates
5230 South Main Street
Eminence, KY 40019

Re: Farmer's Deposit Bank

Reference is made to your recent letter/fax requesting approval of the above name, which is a state chartered bank operating in the State of Kentucky.

As Section 655.922, Florida Statutes, exempts a financial institution, holding company or its subsidiaries from the prohibition of using the word "bank," "banco," "banque," "banker," "banking," "trust company," "savings and loan association," "savings bank," or "credit union," or words of similar import, in any context or in any manner in its corporate name. The Office will not object to the use of the above name being registered to transact business in the state of Florida. This does not authorize the institution to engage in banking, trust or insurance business or any other licensed activity in the state of Florida. Proper regulatory approvals will be required.

Sincerely,

Linda B. Charity
Director

LBC:bk

cc: Karon Beyer, Chief, Bureau of Commercial Recordings, Division of Corporations,
Department of State

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

FINANCIAL SERVICES COMMISSION

RICK SCOTT
GOVERNOR

PAM BONDI
ATTORNEY

JEFF ATWATER
CHIEF FINANCIAL

ADAM PUTNAM
COMMISSIONER OF

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. FARMER'S DEPOSIT BANK INCORPORATED
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. KENTUCKY 3. 61-0189060
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JUNE 18, 1930 5. "PERPETUAL"
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 2005
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5230 SOUTH MAIN STREET, EMINENCE, KY, 40019
(Principal office address)

PO BOX 126, EMINENCE, KY, 40019-0126
(Current mailing address)

8.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: WILLIAM C. PRICE, III, P.A.

Office Address: 522 TWELFTH STREET WEST

BRADENTON, Florida 34205
(City) (Zip code)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Handwritten signature of William C. Price, III]
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: KEITH MOLIHAN DIRECTOR- CARROLL YATES
 Address: 533 TOWNSHIP ROAD 1185 716 HOLLOW TRACE
IRONTON, OHIO 45638 SHELBYVILLE, KY 40065

Vice Chairman: ROBERT W. WALKER DIRECTOR- DALE BERRY
 Address: 336 WOOD LOMOND WAY 1508 MAHOGANY RUN DRIVE
HUNTINGTON, WV 25705 LAGRANGE, KY 40031

Director: TONY WHALEY DIRECTOR- BILL BRAMMELL
 Address: 4230 NORTH MAIN STREET 118 TOLLE COURT
EMINENCE, KY 40019 EMINENCE, KY 40019

Director: JOHN LOGAN BRENT
 Address: 1446 LACIE ROAD
TURNERS STATION, KY 40075

B. OFFICERS

President: CARROLL YATES
 Address: 5230 SOUTH MAIN STREET
EMINENCE, KY 40019

Vice President: DONALD YOUNG
 Address: 5230 SOUTH MAIN STREET
EMINENCE, KY 40019

Secretary: CATHY W. BRYANT
 Address: 5230 SOUTH MAIN STREET, EMINENCE, KY, 40019

Treasurer: _____
 Address: _____

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 DIVISION OF CORPORATION
 2011 MAY 16 PM 2: 28

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
 Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. CARROLL YATES, PRESIDENT & CEO
 (Typed or printed name and capacity of person signing application)

Commonwealth of Kentucky
Elaine N. Walker, Secretary of State

Elaine N. Walker
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Certificate of Existence

Authentication number: 113366
Visit <https://app.sos.ky.gov/ftshow/certvalidate.aspx> to authenticate this certificate.

I, Elaine N. Walker, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

FARMERS-DEPOSIT BANK, EMINENCE, KENTUCKY

is a corporation duly incorporated and existing under KRS Chapter 14A and KRS Chapter 271B, whose date of incorporation is June 25, 1930 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that Articles of Dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 10th day of May, 2011, in the 219th year of the Commonwealth.

2011 MAY 16 PM 2:23
HEAD
SECRETARY OF STATE
DIVISION OF CORPORATION



Elaine N. Walker

Elaine N. Walker
Secretary of State
Commonwealth of Kentucky
113366/0016945